

January 2022

- 1.0.0 PRESENTATIONS
- 1.1.0 Breast Cancer Research within Velindre University NHS Trust
Led by Dr Annabel Borley, Velindre Cancer Centre
- 2.0.0 STANDARD BUSINESS
Led by Professor Andrew Westwell (Chair)
- 2.1.0 Apologies
Apologies
Led by Professor Andrew Westwell (Chair)
 - *Dr Eve Gallop-Evans, Consultant Oncologist*
- 2.2.0 In Attendance
Led by Professor Andrew Westwell (Chair)
Dr Annabel Borley, Consultant Oncologist at
- 2.3.0 Declarations of Interest
Led by Professor Andrew Westwell (Chair)
- 2.4.0 Review of Action Log
Led by Dr Jacinta Abraham, Executive Medical Director
RDI PUBLIC ACTION LOG_21-10-2021.pdf
- 3.0.0 CONSENT ITEMS
Led by Professor Andrew Westwell (Chair)
- 3.1.0 FOR APPROVAL
- 3.1.1 Minutes from the meeting of the Public Research, Development & Innovation Committee held on the 21/10/2021
Led by Professor Andrew Westwell, Chair of the Research, Development & Innovation Sub-Committee
Draft Public RDI Sub-Committee 21_10_21 Minutes V2ST.docx
- 3.2.0 FOR NOTING
There are no Consent items for noting
- 4.0.0 MAIN AGENDA
- 4.1.0 Executive Summary Highlights
Led by Dr Jacinta Abraham, Executive Medical Director
20211229_RDI_Committee13Jan2022_ExecutiveBriefing_JAbraham.docx
20211229_RDI_Committee13Jan2022_ExecutiveLead_JAbraham.pptx
- 5.0.0 STRATEGY, PERFORMANCE AND DELIVERY
Presenter: Name & Title
- 5.1.0 Velindre Futures Research and Development Group Strategy Update
Led by Libby Batt, Head of R&D Cancer Strategy
- 5.2.0 New Velindre Cancer Centre (nVCC) Research Development and Innovation Update
New Velindre Cancer Centre (nVCC) Research Development and Innovation Update
- 5.3.0 Trust Research, Development and Innovation Performance Report
Led by:
Sarah Townsend, Head of Research and Development
Jonathan Patmore, Finance Manager
Edwin Massey, Consultant Haematologist / WBS Rep
Professor Jane Hopkinson
Robyn Davies, Head of Innovation
20220105CoverForPerformanceReport_RDI_SubCommittee13Jan2021.pdf
20220105RD_PerformanceReportQ3_Summary.pdf
- 6.0.0 INTERGRATED GOVERNANCE
- 6.1.0 Research, Development and Innovation Sub-Committee Annual Report 2021
Led by Emma Stephens, Head of Corporate Governance
Annual Report RDI 2JA.docx

7.0.0 ANY OTHER BUSINESS

Prior Approval by the Chair Required

8.0.0 HIGHLIGHT REPORT TO THE TRUST BOARD

Members to identify items to include in the Highlight Report to the Trust Board:

For Escalation

For Assurance

For Advising

For Information

9.0.0 DATE AND TIME OF THE NEXT MEETING

7 April 2022 at 14:00

10.0.0 CLOSE

The Committee is asked to adopt the following resolution in accordance with the Public Bodies (Admission to Meetings) Act 1960:

The Committee hereby resolves that the remainder of the meeting be conducted 'In-Committee - Private Part B'.

PUBLIC RESEARCH, DEVELOPMENT & INNOVATION SUB COMMITTEE ACTION LOG						
Minute Number	Status (Open/Close)	Date Raised	Action	Owner	Comments	Progress
5.1	OPEN	28/04/2021	Research Development & Innovation Intellectual Property Workshop - discuss and plan structure for a half-day workshop	RD	22/07/2021 Update - Following the recent appointment of the new Head of Innovation plans have been initiated to take this forward. 21/10/21 This will now be taken forward following the commencement of Mr Robyn Davies, Head of Innovation and it is planned to schedule the workshop for early 2022. 13/01/2022 Meeting with AGORIP has taken place to arrange putting together a workshop	IN PROGRESS
Actions agreed at the Committee on 22nd July 2021						
2.1.1	OPEN	27/07/2021	Minutes - Item 5.1 Beatson West of Scotland Cancer Centre - Paper to be circulated and presented to the RD&I Sub-Committee when available. Idea is to scope out other centres and see what they are doing with research, what their setup and numbers are, as a way of seeing if there are any lessons to be learnt.	ST	Project on hold until the recently appointed Research Development & Innovation Futures Project Manager is in post, who is currently working their notice period. 13/01/2022 The project manager starts on Monday and the areas have already been identified for them to work on	IN PROGRESS
Actions agreed at the Committee on 21st October 2021						
3.1	OPEN	21/10/2021	Executive Summary Highlight - Jacinta Abraham and Dr Janet Birchall to meet with the FAIR Project Team to provide them with feedback from the JET meeting.	JA	This has been relayed to the JET team but the meeting has not taken place yet.	IN PROGRESS
4.1	OPEN	21/10/2021	Trust Research, Development & Innovation Performance Report Qtr 1 & 2 - AP to arrange for more information on WBS performance to be included in future reports	AP		OPEN
4.4	OPEN	21/10/2021	ARF - Elizabeth Crumpton & Jane Hopkinson to meet to discuss the Trust's Fellowship Scheme	EC	Elizabeth Crumpton has been off work but this will be chased.	OPEN
5.2	OPEN	21/10/2021	Annual Evaluation Report - Supporting Lung Research Through Biosample Collection Report deferred to January RD&I Sub-Committee	SEC	This will be circulated outside of the January RD&I Sub-Committee meeting to support the requirement for a streamlined agenda. 13/01/2022 this will be circulated within the next few weeks.	OPEN

Minutes

Public Research, Development & Innovation Sub Committee Velindre University NHS Trust

Date 21st October 2021
Time 10.00 am – 12.00 noon
Location Microsoft Teams
Chair Professor Donna Mead OBE, Chair

ATTENDANCE		
Prof Donna Mead OBE	Chair	DM
Jacinta Abraham	Executive Medical Director and R&D Lead	JA
Andrew Westwell	Independent Member	DF
Jane Hopkinson	VCC Professor of Nursing and Interdisciplinary Cancer Care	JH
Alan Prosser	Interim Director, WBS	AP
Jonathan Patmore	RD&I Finance Business Partner	JP
Annie Evans	Deputy Director of Nursing, Quality & Patient Experience	AE
Robyn Davies	Head of Innovation	RD
Emma Stephens	Head of Corporate Governance	ES
Sarah Townsend	Head of Research and Development	ST
Melanie Findlay Catherine Currier	Secretariat Support	SEC

0.0.0	PRESENTATIONS	
0.0.1	<p>Addressing the Platelet Storage Lesion – Project Presentation from the Welsh Blood Service</p> <p>DM introduced EM and JN for this agenda item and explained the links to the recording of the launch event that had been included within the presentation slides. Unfortunately neither Prof Donna Mead nor Dr Jacinta Abraham had been available to attend the launch and will arrange to visit the laboratory.</p> <p>EM took the Trust Board through a presentation on a project to address the platelet storage lesion. EM provided information on the background to the RD&I delivery in WBS and the Research Team; the launch of the Component Development & Research Lab and provided examples of collaborative work being undertaken by the team.</p> <p>JN presented the project aims, scope, collaborative work with Cardiff Met, and the papers submitted for publication. The Sub-Committee was provided with information on future research plans for the WBS.</p> <p>JA congratulated the team on the project and requested information on proof of concept, how the service could scale the project/benefits and asked if there</p>	SEC

	<p>was anything this Sub-Committee could provide to add value. JN explained there was one more study to complete and the result of this study would depend on how the project develops and the team would be happy to update the Sub-Committee once the study had completed.</p> <p>AP provided some information on some of the next steps and provided some further information on the development of this service over the last 2 years, during the pandemic, the success of a small team of staff and the vision of the service.</p> <p>AW noted the remarkable progress and asked if WBS had links with haematology etc. AP confirmed that EM was making these links and talking to Haematology and Cwm Taf Health Board on their Blood Health Plan. EM provided information on the work ongoing to develop collaborative links.</p> <p>DM asked further information on the collaborative with the Armed Forces and EM provided an explanation on the history of the collaborative work with the Armed Forces. It was agreed the collaborative work with the Armed Forces and how this links with the work the Trust already does as a 'Armed Forces Silver Award' would be discussed at one of the regular DM and AP meetings.</p> <p>DM felt that this area of work should be highlighted in the Trust-wide communications both internally and externally. It was agreed this item should be added to the Board Development & Learning Session Programme.</p>	ES
1.0.0	STANDARD BUSINESS	
1.1.0	<p>Apologies</p> <p>Prof Donna Mead noted apologies from:</p> <ul style="list-style-type: none"> • Beryl Pugh – Patient Liaison Representative • Peter Richardson – Head of Quality Assurance & Regulatory Compliance, Welsh Blood Service • Eve Gallop-Evans – Consultant at Velindre Cancer Centre • Huw Llewellyn – TCS Project Director • Paul Wilkins – Interim Director of Velindre Cancer Centre • Sian James -Research, Development & Innovation Facilitation Lead, Welsh Blood Service • Mererid Evans • Nicola Williams – Annie Attending. 	
1.2.0	<p>In Attendance</p> <p>Prof Donna Mead welcomed Prof Andrew Westwell who had recently joined the Trust Board as an Independent Member. It was noted the Chair of the RD&I Sub-Committee will transfer to Prof Andrew Westwell.</p>	
1.3.0	<p>Declarations of Interest</p> <p>There were no declaration of interests declared against agenda items.</p>	
1.4.0	Action Points	

	JA reviewed the Action Log, which was updated.	
2.0.0	CONSENT ITEMS	
2.1.0	FOR APPROVAL	
2.1.0	ITEMS FOR APPROVAL	
2.1.1	<p>Minutes from the last Public Research, Development & Innovation Sub-Committee held on the 22nd July 2021</p> <p>The Sub-Committee CONFIRMED that the Minutes of the Public meeting on the 22 July 2021 were an accurate and true reflection.</p>	
2.2.0	FOR NOTING	
2.2.1	<p>Summary of the Minutes from the last Private Research, Development & Innovation Sub-Committee held on the 22nd July 2021</p> <p>The Sub-Committee NOTED the Summary Minutes of the Private meeting on the 22 July 2021.</p>	
3.0.0	MAIN AGENDA	
3.1.0	<p>Executive Summary Highlights</p> <p>JA provided a presentation to the Sub-Committee and highlighted the following:</p> <ul style="list-style-type: none"> • Activities of VCC and WBS Research Teams; • Innovation activities; • The appointment of a Dr Mererid Evans, Director for Wales Cancer Research Centre • Tripartite Cancer Research Hub @UHW • The development of a Tripartite Partnership Board with Cardiff University, Cardiff & Vale University NHS and the Trust • Nursing, Allied Health Professionals (AHPs), Clinical and Healthcare Scientists Research Event • Feedback from the Welsh Government/Trust Joint Executive Team Meeting (JET) <p>It was noted the presentation would be attached to the minutes from today's RD&I Sub-Committee. DM offered her congratulations to Dr Mererid Evans, on behalf of the Committee on her new appointment. EM requested further information from the feedback received at the JET meeting regarding the FAIR project. It was agreed JA, along with Dr Janet Birchall would meet with the FAIR Project team to provide an update.</p> <p>Prof Donna Mead acknowledged the AHP, Clinical and Healthcare Scientist Research Event and congratulated all involved in the event and for all those involved in the research.</p> <p>The Sub-Committee DISCUSSED and NOTED the report.</p>	JA
4.0.0	STRATEGY, PERFORMANCE & DELIVERY	

4.2.0	<p>Trust Innovation Update</p> <p>RD provided a presentation to the Sub-Committee , which included:</p> <ul style="list-style-type: none"> • Background to the Innovation Plan; • Prioritise for the Trust; • Work to develop the innovation process; • Platform to develop innovation across the Trust; • An update on Partnership Working; • Plans for publication and promotion of the Trust’s achievements; • Next step plans. <p>DM felt it would be useful for the presentation from the AHP, Clinicians and Health Scientists to be shared with RD.</p> <p>AW noted that Communication was recurrent theme and asked what resource the Trust has for sharing good news stories and if there was an opportunity to individualise the content of the Trust’s web content. JA acknowledged there was no dedicated RD&I communication support and this needed to be considered. The Sub-Committee agreed there should be an action to explore the communication resources required to support RD&I and a proposal to be submitted to the next RD&I Sub-Committee meeting. MB endorsed the approach being taken by RD and the need to include resources in future financial planning.</p> <p>The RD&I Sub-Committee DISCUSSED and REVIEW the content of the presentation and ENDORSED the next steps.</p>	SEC
4.3.0	<p>New Velindre Cancer Centre (nVCC) Research Development & Innovation Group Update</p> <p>RD undertook this agenda item on behalf of Mr Huw Llewellyn, who was unavailable for today’s meeting. It was noted that in January 2021, the nVCC project began the process of establishing an nVCC RD&I Group to produce a programme of RD&I project work to inform and learn from the nVCC Project</p> <p>The committee NOTED the content of this report.</p>	
4.4.0	<p>Advancing Radiotherapy Fund (ARF) Highlight Report</p> <p>EC took the Sub-Committee through the highlight report for the Advancing Radiotherapy Fund Meeting. It was noted that both the Chair of the ARF meeting Janet Pickles and Mark Osland, Vice-Chair had recently left the Trust. DM was covering the Chair role on an interim basis and MB would be taking over the Vice-Chair role;</p> <p>An update was received on:</p> <ul style="list-style-type: none"> • the RD&I Lead; • the appointment of an Administrator; • a Moondance application and the use of funds; • work with the Interim Charity Director/Fundraising Team; • A funding application received by the ARF; • Fellowship programme <p>JH requested further information on the fellowship scheme and it was agreed that EC would discuss this outside of the meeting.</p>	EC

	<p>DM noted there was a theme in the applications received by Trust's Small Grants Scheme of being provided with time in their roles to undertake the research projects due to work pressures. JA noted this was an issue in other areas of the Trust. EC provided the Sub-Committee with work that was ongoing to develop a strategic approach to research applications to ARF. It was agreed to include this in the Sub-Committee's Highlight Report to the Trust Board.</p> <p>The Sub-Committee discussed the possibility of developing a Research Innovator in all departments for both divisions and it was agreed this warranted further consideration.</p> <p>The RD&I Sub-Committee NOTED the contents of the report and actions being taken.</p>	
5.0.0	INTEGRATED GOVERNANCE	
5.1.0	<p>Risk Register</p> <p>ST provided the Sub-Committee with an oral update on the risk register. It was noted there was one open risk, which was being managed through Operational Management Group and the situation was being monitored.</p> <p>The RD&I Sub-Committee NOTED the current position as outlined by Sarah Townsend.</p>	
5.2.0	<p>Annual Evaluation Report - Supporting Lung Research Through Biosample Collection, due to the leads for this agenda item not being available, it was agreed this item would be deferred until the next Sub-Committee meeting.</p>	Defer red
5.3.0	<p>Velindre Cancer Centre Nurse, Allied Health Professional and Therapeutic Radiographer Research Capacity Annual Report</p> <p>JH explained the report was been provided for information. JH provided information on her background to the Sub-Committee and on the development of a Partnership between the Trust and Cardiff University. An overview of activities to build research capacity across Nurse, Therapies and Healthcare Scientists staff groups over the last 12 months was provided, the establishment of a Velindre Healthcare Research Group and information on next steps.</p> <p>AW asked if other healthcare professionals outside of the groups mentioned also have access to research opportunities i.e. Pharmacists. JH confirmed this was open to other healthcare professionals and a bid had recently been received in which a Pharmacist was a co-applicant.</p> <p>The Sub-Committee discussed how this work links into other research taking place across the Trust and 'Velindre Futures'. It was agreed this required further consideration and discussions. JA and JH would consider this as part of their 1:1 meetings. It was noted this report would be presented to the Charitable Funds Committee.</p> <p>The Sub-Committee NOTED the update provided.</p>	JH

6.0.0	<p>HIGHLIGHT REPORT TO THE TRUST BOARD</p> <p>The Sub-Committee identified the following items to include in the Highlight Report to the Quality, Safety and Performance Committee:</p> <ul style="list-style-type: none"> • For Escalation: <ul style="list-style-type: none"> ○ Ability for research capacity given current service pressures; ○ The need for dedicated Communication Resource for Research; • For Assurance <ul style="list-style-type: none"> ○ No items. • For Advising: <ul style="list-style-type: none"> ○ One Wales approach and model; ○ Innovation work is taking shape; ○ Triangulate of the Integrated Performance Report. ○ Velindre Cancer Centre Nurse, Allied Health Professional and Therapeutic Radiographer Research Capacity Annual Report and how this was starting to create capacity for research for these staff groups in a co-ordinated way. ○ The update of the Advancing Radiotherapy Fund (ARF) Highlight Report and creating capacity for staff group in a co-ordinated way. 	
7.0.0	<p>ANY OTHER BUSINESS: There were no additional items raised for discussion.</p>	
8.0.0	<p>DATE AND TIME OF THE NEXT MEETING: 13th January 2022 at 10.00 am - 12.30pm via Microsoft Teams.</p>	
9.0.0	<p>CLOSE</p> <p>That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest in accordance with Section 1(2) Public Bodies (Admission to Meetings) Act 1960 (c.67).</p>	

RESEARCH, DEVELOPMENT AND INNOVATION SUB-COMMITTEE

Executive Medical Director and Board Lead for RD&I Briefing

DATE OF MEETING	13 January 2022
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PUBLIC OR PRIVATE REPORT	Public
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IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report
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PREPARED BY	Sarah Townsend, Head of Research & Development Christopher Cotterill-Jones, Research Delivery Manager
PRESENTED BY	Jacinta Abraham, Executive Medical Director
EXECUTIVE SPONSOR APPROVED	Jacinta Abraham, Executive Medical Director

REPORT PURPOSE	FOR NOTING
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COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING

COMMITTEE OR GROUP	DATE	OUTCOME

ACRONYMS

RD&I	Research, Development and Innovation
R&D	Research and Development

HCRW	Health and Care Research Wales
WCRC	Wales Cancer Research Centre
CVUHB	Cardiff & Vale University Health Board
JRO	Joint Research Office
VUNHST	Velindre University NHS Trust
VCC	Velindre Cancer Centre
AWMGS	All-Wales Medical Genetics Service
RiTTA	Realtime information Technology Towards Activation

1. SITUATION/BACKGROUND

The purpose of this report to the RD&I Sub-Committee is to provide a high-level update on key activities relating to the Research, Development and Innovation taking place during quarter 3 of the financial year 2021/22.

2. ASSESSMENT / SUMMARY OF MATTERS FOR CONSIDERATION

2.1 RESEARCH & DEVELOPMENT

2.1.1 NHS R&D Leadership Work Plan

The Welsh Government and Health and Care Research Wales (HCRW) have established a NHS R&D Leadership Group. The group membership is made up of the R&D Directors from each of the NHS organisations in Wales.

An action from a recent meeting of the NHS R&D Leadership Group was for each organization to share views on a future work plan for the group to include areas for review and priorities, working in partnership with Welsh Government, Health and Care Research Wales and Support and Delivery Centre colleagues.

The Trust response was submitted in November 2021 with suggested areas for review and priorities under the headings of:

- Governance
- Finance

- Capacity and Capability
- Infrastructure
- Strategy and Policy

2.1.2 Health and Care Research Wales Spending Plan

The Trust received the following from Health and Care Research Wales in November 2021.

- Velindre University NHS Trust Provisional 2022/23 Spending Plan.
- Summary of the approach taken related to COVID19 Recovery Funding and 2022/23 Spending Plans

The total 2022/23 spending plans submitted by NHS organisations have been reviewed using the same approach as in 2021/22 – ongoing support for substantive posts and review of requests for new or extensions against the decision framework.

The Trust's provisional 2022/23 forecasted Spending Plan is £1,047,437. The total agreed in the 2021/22 initial Spending Plan was £796,174.

For 2022/23, the Trust will receive and uplift of £251,263.

The Trust is also in discussion with Health and Care Research Wales regarding the support of some research delivery posts where funding is still to be confirmed.

2.1.3 COVID19 and Research

The Head of Policy – Research & Development Division, Welsh Government, Carys Thomas, has written to all NHS R&D Directors and Leads (10 December 2021) providing guidance regarding the redeployment of research staff.

The guidance states:

It is important that workforce support is maintained where possible for research studies, particularly those studies which are part of the clinical care pathway - offering potential therapeutic benefit to patients via improved diagnosis and/or a treatment/intervention improving or extending life (interventional studies); recognising the wider workforce challenges across the system. There are also contractual, legal, ethical risks that will need to be considered.

If there is a request to redeploy research staff locally to other non-research clinical services, where this impacts on the delivery of interventional studies in particular and risk has been identified locally, the Trust is asked to escalate the request to the Health and Care Research Wales Director of Support & Delivery to support exploration of all potential solutions.

As a result of the COVID19 Omicron variant, the Trust has reconvened the Gold and Silver Command structure for business continuity planning. Sarah Townsend, Head of R&D and Christopher Cotterill-Jones, Research Delivery Manager are members of the Velindre Cancer Centre (VCC) Silver Command Group. RD&I/Trials report the current service status and any service pressures resulting from COVID19 to the group three times a week, currently.

R&D have also updated the Business Continuity Plan, previously approved by Gold command, for the Omicron variant. This includes plans to:

- Contact research sponsors seeking confirmation of their intentions in respect of the management of their research studies, e.g. continue, suspend or close.
- Manage the research service and actions to take in the event of certain triggers, i.e.
 - Reduction in staff resource resulting in research delivery capacity and, therefore a reduction in the ability to offer research studies to patients
 - Increase in research studies identified as:
 - Essential studies providing evidence for pandemic management, i.e. nationally prioritised COVID19 Urgent Public Health research studies.
 - Studies where the research protocol includes treatment or intervention without which patients could come to harm. This includes studies that provides access to potentially life preserving or life-extending treatment not otherwise available to the patient.
- Reversal of the Trust research activation programme, where the decision to reverse the programme is dependent on the risk profile and the following factors including, but not limited to:
 - A study sponsor decision to halt screening and recruitment activities to their study
 - A surge in the COVID-19 pandemic infections
 - A reduction in research staff capacity resulting from COVID-19 infection or isolation requirements
 - A reduction in the availability of study support services both internal and external to the Trust

Where the continuation of the Trust's full research portfolio is no longer possible as dictated above, the Division's intention is to halt screening and recruitment activities for studies in reverse reactivation programme cohorts order, starting with cohort 3, then cohort 2 and finally

cohort 1. The decision on the studies in each cohort will take into consideration the position of the study sponsor and the priorities of the SST.

The Clinical R&D Leadership team shall make the decision to reverse the Trust research reactivation programme in discussion with the SST leads. The Trust RD&I Operational Management Group will oversee implementation of this work.

2.1.4 “One Site” Wales

The Trust is the “One Site Wales” Coordinating NHS Organisation for a study to assess a multi-cancer early detection test.

The University of Oxford who sponsored this study, known as the SYMPLIFY Trial and has identified the “One Site Wales” delivery model and in particular Velindre’s management of this as gold standard. It is one of the first research studies to adopt the “One Site Wales” approach outside the COVID19 vaccine arena. The Trust worked with six Wales Health Boards to set-up and deliver this study, with Prof Dean Harris (Swansea Bay UHB) and Prof Tom Crosby (Velindre University NHS Trust) acting as Principal Investigators for Wales.

On 15 Sep 2021, an official press release of GRAIL’s involvement in SYMPLIFY, and future trials involving the Galleri technology was released. This identified Velindre’s role in coordinating the delivery of SYMPLIFY across 19 “district” hospitals in Wales. Recruitment to the trial finished on 30 November 2021, with Wales contributing an incredible recruitment figure of 1232 participant to a 6240 total participants.

Sarah Townsend, Head of R&D and Christopher Cotterill-Jones, Research Delivery Manager are part of the writing group with colleagues from HCRW and Public Health Wales to write up the process on behalf of Wales as well as devising a pathway to access this delivery model, with the aim of publishing in management journals.

2.1.5 Oncacare

The Trust has signed a letter of intent and a confidentiality collaboration agreement with Oncacare to allow information to be shared between the organisations.

Oncacare and Velindre University NHS Trust collaboration agreement is undergoing review to ensure it responds to the Trust’s initial comments and is reflective of the outcomes of the meetings, facilitated by Wales Cancer Research Centre (WCRC), attended by senior R&D staff from the Trust and from Cardiff & Vale University Health Board (CVUHB). The Trust is working

with leads for this work from the Joint Research Office (JRO) at CVUHB, at their request, in relation to the review of this collaboration agreement

Oncacare are currently updating their collaborative agreement template and a response is awaited.

The Trust had a meeting planned with Oncacare for Tuesday 16 Nov 2021, organised by the Executive Assistant to Oncacare CEO to discuss how Oncacare might collaborate with Velindre in support of the research portfolio to include radiotherapy and phase III studies. However, a number of people were unable to attend. Only Sarah Townsend (VUNHST), Libby Batt (VUNHST) and Patricia Carter (Oncacare) joined the meeting. Oncacare are in the process of rescheduling this meeting.

Oncacare are working with both VUNHST and CVUHB with a view to opening both organisations as Oncacare sites. However, their overall goal is to work with Wales coordinated as one site to include North and West Wales.

2.2 WELSH BLOOD SERVICE

2.2.1 Component Development Research Laboratory

This autumn, the Welsh Blood Service launched a new facility. The Component Development Research Laboratory which will provide the facilities and capacity to realise the ambition of being a centre of excellence in blood component advancement. Manufacturing space has been transformed into a dedicated facility, and state-of-the-art equipment, have been commissioned. A small team of specialist scientists has been recruited with an ambition to grow further as the research program develops.

The laboratory will perform a wide range of functions. It will lead the service on the implementation of changes to components regulations. It will also research and develop innovative technologies for blood manufacturing, investigating new methodologies, and producing novel components.

Several academic and healthcare partnerships are already underway. One of the first outputs will be a thesis from Cardiff Metropolitan University in Platelet Storage Lesion. This is the outcome of a KESS2 PhD studentship that the Welsh Blood Service has supported.

2.3 INNOVATION

2.3.1 NHS Wales “Scaling up Innovation and Transformation Award”

Velindre and All-Wales Medical Genetics Service's pharmacogenetics test wins prestigious 'Scaling up Innovation and Transformation Award'.

An innovative new test that can reduce adverse reactions to chemotherapy medications by screening patients in advance of treatment to identify those at risk of severe side effects was awarded the "Scaling up Innovation and Transformation Award" at the recent MediWales Innovation Awards.

The test, which was conceived, developed and tested by Velindre Cancer Centre (VCC) in partnership with the All-Wales Medical Genetics Service (AWMGS), uses genetic variants to predict the likelihood that a particular drug may cause unintended harm through an adverse reaction.

Adverse reactions to medications account for 6.5% of UK hospital admissions and cost the NHS around £466M annually.

Pharmacogenetic testing is an innovative new field and this test is the first pharmacogenetics test to be commissioned for use by the NHS. As a result, Wales has become the first country in the UK to routinely screen all cancer patients being treated with certain types of chemotherapy. Velindre was at the forefront of this work.

A pilot began in January 2020 to develop the test and testing pathway for patients due to receive fluoropyrimidine (chemotherapy), along with clinical guideline documents and education packages. To-date, more than 2000 patients have been screened and a total of 225 patients in Wales have had their chemotherapy treatment stratified, therefore reducing their risk of an ADR. It is likely that one or two deaths will have already been prevented by the testing.

The team are now scoping the need for a largescale NHS test that will meet the increasing demands at which targeted therapies are being licensed and approved.

2.3.2 RiTTA (Realtime information Technology Towards Activation)

RiTTA is an artificial intelligence chatbot trained to understand and response to users frequently asked questions, using natural language processing to learn from previous interactions and provide intelligent answers. The RiTTA chatbot is intended to support cancer patients, carers and families in a way that offers empowerment, advice and independence for their care choices.

Through the person-centred design thinking process, Velindre, in conjunction with industry partners, have developed the world's first artificial intelligence enabled virtual assistant trained in oncology to proof of concept.

RiTTA is currently in beta testing; this is the final round of testing before releasing to a wide audience. The purpose is to use a real environment and users to uncover any bugs or issues before a general release in early 2022. The use of a live feedback form within the assistant enables the Trust to capture this information directly from the patient testing groups.

To date, 54 users have completed the feedback form with data showing:

- 85% of users believe the Chabot should be made available to patients awaiting their first appointment
- 75% of users scored RiTTA's performance 7 or above on a 10 point Likert scale

In readiness for the live launch the Innovation team have deployed and embedded the assistant within a newly created webpage on the Trust website.

3. IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	There are no specific quality and safety implications related to the activity outlined in this report.
RELATED HEALTHCARE STANDARD	Governance, Leadership and Accountability
	<ul style="list-style-type: none"> • Standard 3.3 Quality Improvement, Research and Innovation • Standard 3.4 – Information Governance and Communications Technology • Standard 3.5 – Record Keeping
EQUALITY IMPACT ASSESSMENT COMPLETED	Not required
LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.



GIG
CYMRU
NHS
WALES

Ymddiriedolaeth GIG
Prifysgol Felindre
Velindre University
NHS Trust

FINANCIAL IMPLICATIONS / IMPACT	Yes (Include further detail below)
	In addition to the funding received from commercial research studies, the Trust receives funding from Health and Care Research Wales. The number of portfolio studies and patients recruited into these studies inform the level of funding received by the Trust

4. RECOMMENDATION

It is recommended that the RD&I Sub-Committee note for discussion this executive briefing.

Research, Development & Innovation (RD&I)

Sub-Committee

13 January 2022

Executive Lead Briefing

Dr. Jacinta Abraham, Executive Medical Director

Content

- Velindre University NHS Trust
 - Research & Development
 - Welsh Blood Service
 - Innovation



Velindre University NHS Trust: Research & Development

NHS R&D Leadership Work Plan

- Health and Care Research Wales – R&D Division at Welsh Government has established a NHS R&D Leadership Group
- All NHS Wales organisations are represented by the organisation's R&D Directors
- All organisations were asked to contribute to the group's work plan
- The Trust's response was submitted on 09 Nov 2021

HCRW Finance Spending Plan

- The Trust received the provisional HCRW spending plan 2022/23 in Nov 2021
- The Trust's provisional 2022/23 forecasted spending plan is £1,047,437
- The total agreed 2021/22 initial spending plan was £796,174
- For 2022/23, the Trust will receive an uplift of £251,263

Velindre University NHS Trust: Research & Development

COVID19 and Research

- The R&D Division, Welsh Government has issued guidance (10 Dec 2021) regarding redeployment of research staff to all NHS R&D Directors
- The guidance stresses the importance of maintaining workforce support, where possible, for research studies, particularly those that are part of the clinical care pathway – offering potential therapeutic benefit via improved diagnosis, treatment or intervention improving or extending life
- RD&I/Trials report through Trust silver command on service pressures
- R&D have updated the previously Gold command approved business continuity plan for the Omicron variant
- Plans are in place to
 - Contact sponsor organisations on their intentions for managing their studies
 - Take action if service reduction is required
 - Reverse the Trust research activation programme

Velindre University NHS Trust: Research & Development

“One Site Wales”

- VUNHST is the “One Site Wales” coordinating NHS organisation for a study to assess multi-cancer early detection test.
- The Trust and six Wales Health Boards working together on the set-up and delivery of this study.
- Wales was the highest recruiting site, reaching an incredible recruitment figure of 1232 participants of a 6240 total participants.

Oncacare

- VUNHST has signed a letter of intent and confidentiality collaboration agreement with Oncacare.
- Oncacare is working with VUNHST and CVUHB to open both organisations as Oncacare sites.
- VUNHST is working with the JRO at CVUHB in relation this collaborative.
- WCRC is facilitating regular meetings between organisations.

Velindre University NHS Trust: Welsh Blood Service

Component Development Research Laboratory

- WBS launched the Component Development Research Laboratory in autumn 2021.
- Provides facilities and capacity to realise the ambition of being a centre of excellence in blood component advancement.
- The Laboratory will lead the service on the implementation to component regulations
- The Laboratory will research and develop innovative blood manufacturing technologies, investigating new methodologies and producing novel components.
- Several academic and healthcare partnerships underway.
- One of the first outputs is a WBS supported KESS2 PhD studentship thesis in Platelet Storage Lesion.

Velindre University NHS Trust: Innovation

NHS Wales “Scaling up Innovation and Transformation Award”

- Velindre partnering with the All-Wales Genomic Service (AWMGS) won the NHS Wales “Scaling up Innovation and Transformation Award”
- The partnership developed an innovative test that can reduce adverse reactions to chemotherapy by screening patients to identify risk of side effects
- The test uses genetic variants to predict likelihood of adverse reaction

RiTTA

- RiTTA – artificial intelligence chatbot.
- Trained to understand and respond to users frequently asked questions.
- RiTTA is currently in beta testing, using a real environment and users to uncover bugs and issues.
- Wider audience release in early 2022.
- Feedback shows 85% of 54 users believe RiTTA should be available to patients awaiting first appointment.

RESEARCH, DEVELOPMENT & INNOVATION COMMITTEE

RD&I Integrated Performance Report – 2021/22 Quarter 3

DATE OF MEETING	13 January 2022
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PUBLIC OR PRIVATE REPORT	Public
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IF PRIVATE PLEASE INDICATE REASON	Not Applicable - Public Report
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PREPARED BY	Sarah Townsend, Head of Research & Development Christopher Cotterill-Jones, Research Delivery Manager
PRESENTED BY	Sarah Townsend, Head of Research & Development
EXECUTIVE SPONSOR APPROVED	Jacinta Abraham, Executive Medical Director

REPORT PURPOSE	FOR NOTING
-----------------------	------------

COMMITTEE/GROUP WHO HAVE RECEIVED OR CONSIDERED THIS PAPER PRIOR TO THIS MEETING

COMMITTEE OR GROUP	DATE	OUTCOME

ACRONYMS

RD&I	Research, Development & Innovation
OMG	Operational Management Group

EMB	Executive Management Board
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1. SITUATION/BACKGROUND

At the RD&I Sub-Committee convened on 21 October 2021, the Sub-Committee received the RD&I Integrated Performance report for Quarters 1 and 2 of the 2021/22 Financial Year.

2. ASSESSMENT / SUMMARY OF MATTERS FOR CONSIDERATION

The attached RD&I Integrated Performance Report summarises the activities of the Velindre University NHS Trust's Research, Development & Innovation division during quarter 3 of financial year 2021/22.

The intention is that the this report will be submitted quarterly to the RD&I Operational Management Group, with key highlights and items for escalation being submitted to the Executive Management Board (Shape).

The report will be received by the Trust RD&I Sub-Committee for assurance.

3. IMPACT ASSESSMENT

QUALITY AND SAFETY IMPLICATIONS/IMPACT	There are no specific quality and safety implications related to the activity outlined in this report.
RELATED HEALTHCARE STANDARD	<p>Governance, Leadership and Accountability</p> <ul style="list-style-type: none"> Standard 3.3 – Quality Improvement, Research and Innovation Standard 3.4 – Information Governance and Communications Technology Standard 3.5 – Record Keeping
EQUALITY IMPACT ASSESSMENT COMPLETED	<p>Not required</p> <p>Awaiting Trust guidance on requirements for Equality Impact Assessments</p>
LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.



GIG
CYMRU
NHS
WALES

Ymddiriedolaeth GIG
Prifysgol Felindre
Velindre University
NHS Trust

FINANCIAL IMPLICATIONS / IMPACT	Yes (Include further detail below)
	In addition to the funding received from commercial research studies, the Trust receives funding from Health and Care Research Wales. The number of portfolio studies and patients recruited into these studies inform the level of funding received by the Trust.

4. RECOMMENDATION

The RD&I Sub-Committee is requested to:

- Note for discussion this RD&I Integrated Performance Report for quarter 3 of the financial year 2021/22.



GIG
CYMRU
NHS
WALES

Ymddiriedolaeth GIG
Prifysgol Felindre
Velindre University
NHS Trust

Velindre University NHS Trust

Research, Development & Innovation - Integrated Performance Report

2021/22 – Quarter 3

Today's research is tomorrow's care



Velindre University NHS Trust
Research & Development Department
Velindre Cancer Centre
Velindre Road, Whitchurch
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Ffôn/Tel: 029 2061 5888



Canolfan Ganser Felindre
Velindre Cancer Centre



Welsh Blood Service
Gwasanaeth Gwaed Cymru

Contents

1	Introduction	4
2	Trust	4
2.1	Enabling Research	4
2.1.1	Research, Development & Innovation Division	4
2.1.2	Wales	5
2.1.3	United Kingdom.....	6
2.2	Research Portfolio	7
2.2.1	Sponsored research portfolio	7
2.2.2	Hosted research portfolio	8
2.3	Finance.....	10
2.3.1	Background / Context.....	10
2.3.2	Summary of Performance against Key Financial Targets	10
2.3.3	Analysis of Performance to Date and Forecast Outturn	11
2.3.4	Pay Analysis by Staff Group.....	11
2.3.5	Non Pay Analysis by Category.....	12
2.3.6	Income Analysis by Category.....	12
2.4	Velindre Futures Cancer RD&I Ambitions.....	13
2.4.1	Velindre Cancer Centre.....	13
2.4.2	Cardiff Cancer Research Hub (CCRH) – A Tripartite Approach.....	13
2.4.3	University Health Board Partner Discussions.....	14
2.5	Nursing and Interdisciplinary Research	14
2.5.1	Progress in building nursing and interdisciplinary research.....	14
2.5.2	Performance at December 2021	15
2.6	Innovation	16
2.6.1	Key highlights and achievements.....	16
2.6.2	Innovation.....	16
2.6.3	Purpose and Strategic Developments	17
2.6.4	Priority – Themes	17
2.6.5	Process	18
2.6.6	Platform.....	18
2.6.7	Partnerships	19
2.6.8	Publication – Promotion - Presentations	20

2.6.9	Performance.....	20
2.7	Health and Care Standards	22
3	Welsh Blood Service.....	23
3.1	Key highlights and achievements	23
3.1.1	Launching the Component Development Research Laboratory.....	23
3.2	WBS RD&I Project Portfolio Highlights	23
3.3	WBS RD&I Project Portfolio Metrics	24
4	Velindre Cancer Centre	24
4.1	Key highlights and achievements	25
4.1.1	CLEAR	25
4.1.2	Other news.....	25
4.1.3	Study performance rankings	25
4.2	Operational plan 2020/21 to 2021/22.....	26
4.2.1	Monitor the development of the CaNISC replacement	26
4.2.2	Implement an income distribution model for Trust research.....	27
4.2.3	Develop guidance/processes for the Trust to licence intellectual property	27

1 Introduction

This integrated performance report summarises the activities of the Velindre University NHS Trust's Research, Development & Innovation division in the third quarter of the financial year 2021/22.

The information in this report represents the activities from the following areas of the organisation:

- Trust
- Welsh Blood Service
- Velindre Cancer Centre

2 Trust

2.1 Enabling Research

2.1.1 Research, Development & Innovation Division

Joint Research Office – Cardiff & Vale UHB and Cardiff University

The Trust has been invited to contribute to developments within the Joint Research Office service for Cardiff & Vale University Health Board (CVUHB) and Cardiff University to establish closer collaboration.

Sarah Townsend, Head of Research & Development and Christopher Cotterill-Jones, Research Delivery Manager have begun attending monthly meetings with the Joint Research Office counterparts to contribute to developments and facilitate feedback from the Trust's perspective. The second of these monthly meetings took place in December 2021.

To date the following points have been discussed:

- The ongoing Velindre Futures work on the "Overarching Cancer Research and Development Ambitions 2021-31" and the development of the Cardiff Cancer Research Hub.
- The development of a clinical output specification and work plan for the Cardiff Cancer Research Hub detailing the future service model, a phased approach and includes both infrastructure and workforce required to deliver research success.
- Establishing collaborative working arrangements between the Trust and the Joint Research Office considering the study set-up processes and staffing to ensure synergy and the development of an efficient and joined up process for setting up research studies across the organisation.
- Resource limitations and issues the Joint Research Office are currently experiences.

Trust R&D Small Grant Scheme

The Trust R&D Small Grant Scheme closed to applications on 01 September 2021, and the award panel met on 29 September 2021. The panel was chaired by Nicola Williams, Executive Director of Nursing, AHPs and Health Science and consisted of the Trust Chair, Professor Donna Mead OBE, with representation from the Welsh Blood Service and Velindre Cancer Centre.

The panel considered the ten applications received and supported six projects. Two of the six project applications have since been withdrawn. The four supported project applications are as follows:

Project title	Applicant's designation
Vaginal dilator use for the management of vaginal stenosis, a UK scope of current practice	Advanced Practice Gynae-oncology Physiotherapist
An evaluation of the improvement of patient access to emotional support services from the inclusion of a cancer support specialist role within the clinical psychology and counselling team at Velindre Cancer Centre.	Consultant Clinical Psychologist
An Investigation of how Taste Changes Recover following Radiotherapy for Head and Neck Cancer	Consultant Therapeutic Radiographer
Investigating MRI Autosegmentation for Gynae brachytherapy	Radiotherapy Pre-Treatment Imaging Physicist

2.1.2 Wales

HCRW Research Management Operational Group

Sarah Townsend, Head of Research & Development attended the second meeting of the Health and Care Research Wales (HCRW) Research Management Operational Group on 15 November 2021. The group received feedback from other Health and Care Research Wales groups that had been incorporated into the Terms of Reference.

The Terms of Reference were updated to reflect the involvement of the Research Management Operational Group in the implementation of actions arising from the NHS R&D Leadership Group work plan.

The group also reviewed and discussed items raised by the Research Management leads of the NHS organisations. These included:

- The process for Letters of Access relating to primary care.
- The process for claiming Excess Treatment Costs (ETCs).
- A request for an overview session to understand the Health and Care Research Wales Performance Management / Business Intelligence
- A request for an update on Health and Care Research Wales plans for primary care.
- A request for clarity relating to the Capacity and Capability process in relation to national study set-up

- The process of identifying potential research sites and the involvement of the Open Data Platform (ODP) and Specialty Leads
- The impact on processes of the guidance for Studies not requiring Research Ethics Committee (REC) review

2.1.3 United Kingdom

UK Vision for Clinical Research: Recovery, Resilience and Growth (RRG)

The UK Clinical Research Recovery, Resilience and Growth (RRG) Programme launched the vision for “The Future of UK Clinical Research Delivery” in March 2021, with the 2021 to 2022 implementation plan published in June 2021. The four UK nations are in the process of providing an update on the programme, updating the implementation plan, setting out the key achievements and milestones that have already been achieved and provide further detail on what can be expected from the programme moving forward.

The following provides an update on the areas where there has been noteworthy work to date:

a) Action area 1: improving the speed and efficiency of study set-up

- Work to design and implement a national contract value review process for commercial contract research is ongoing. The UK National Contract Value Review (NCVR) working group is developing a project plan and timescales on the proposed model. Jonathan Patmore, Finance Business Partner for RD&I is representing the Trust at the oversight group for Wales to steer the process and implementation. The current intention is to go live from 01 April 2022 using an UK-wide process for commercial studies adhering to a single price list, with a 12-month period to overcome difficulties in implementation.
- The combined review from the Medicines and Healthcare products Regulatory Agency (MHRA) and the UK Research Ethics Services will facilitate speedier set up for clinical research trials by facilitating applicants to only make a single application for both Clinical Trial Authorisation (CTA) and Research Ethics Committee (REC) opinion.
- The Experimental Cancer Medicine Centre (ECMC) Network, with support from MHRA and HRA, are beginning work on delivering a pilot to set up phase I oncology trials within 80 days of the IRAS submission.

b) Action area 2: building upon digital platforms to deliver clinical research

- Work is underway to establish guidance and support services that support data-enabled recruitment and help researchers understand, navigate and use data services as part of effective study delivery.
- Work is underway to map the various options for data enabled recruitment.
- Work is ongoing on a UK-wide approach to Find, Recruit and Follow-up: a seamless system of digital platforms to ensure research sponsors can bring

research, particularly those studies with a digital component, to any part of the UK effectively.

c) Action area 4: aligning our research programmes and processes with the needs of the UK health and care systems

- The use of flexible workforce and delivery models will be increased – particularly to support research delivery in primary and community care. Further strategies to boost capacity and expand to other research settings are being explored across the whole of the UK.

d) Action area 5: improving visibility and making research matter to the NHS

- A scoping exercise for shaping the Embedding Research in the NHS programme in Wales will be undertaken early 2022, which will provide ideas/recommendation on next steps and priorities for embedding research in the NHS in Wales. This will inform the comprehensive programme of work to be outlined in spring 2022. In parallel, discussions are ongoing with UK counterparts to ensure alignment and collaboration where needed.
- Role descriptions have been drafted and agreed for Research Champion Board Members for health boards in Wales. Next steps will be agreed with colleagues in Welsh Government shortly that will include a Welsh Health Circular to support this important endeavour.
- A review of research career pathways in health and social care in Wales has now completed and the publication of the report, with recommendations for implementation, is expected imminently.
- A UK wide Metrics Task and Finish group is currently being established. A national lead has been identified and Health and Care Research Wales is also seeking representation from a Welsh R&D Director.

2.2 Research Portfolio

This part of the report contains performance data taken from the Local Performance Management System (LPMS) – (data cut 24 December 2021).

2.2.1 Sponsored research portfolio

Sponsored research is the research where the Velindre University NHS Trust takes the legal responsibility for the design, management and conduct of the research. Sponsored research may be hosted by the Trust and/or hosted by other healthcare organisations and research institutions across the UK, Europe and World-wide. The number of Trust sponsored studies may be relatively small, but the Research & Development team commit a significant amount of resource to ensure that the Trust's sponsor responsibilities are met.

The Trust may delegate some sponsor responsibilities to a clinical trials unit to manage larger research studies hosted by other healthcare organisations and research institutions.

Up to the end of Quarter 3 of Financial Year 2021/22, the Trust sponsored research portfolio is as follows:

Metric Description	Year to date
Number of sponsored research studies (Total)	4
• Number of sponsored research studies that are Trust-wide	2
• Number of sponsored research studies that are UK-wide	2
• Number of sponsored research studies that are Europe-wide	0
• Number of sponsored research studies that are World-wide	0
Number of research sites opened for sponsored research studies	16
Number of publications from sponsored research studies	2
Number of participants recruited to sponsored research studies	174

2.2.2 Hosted research portfolio

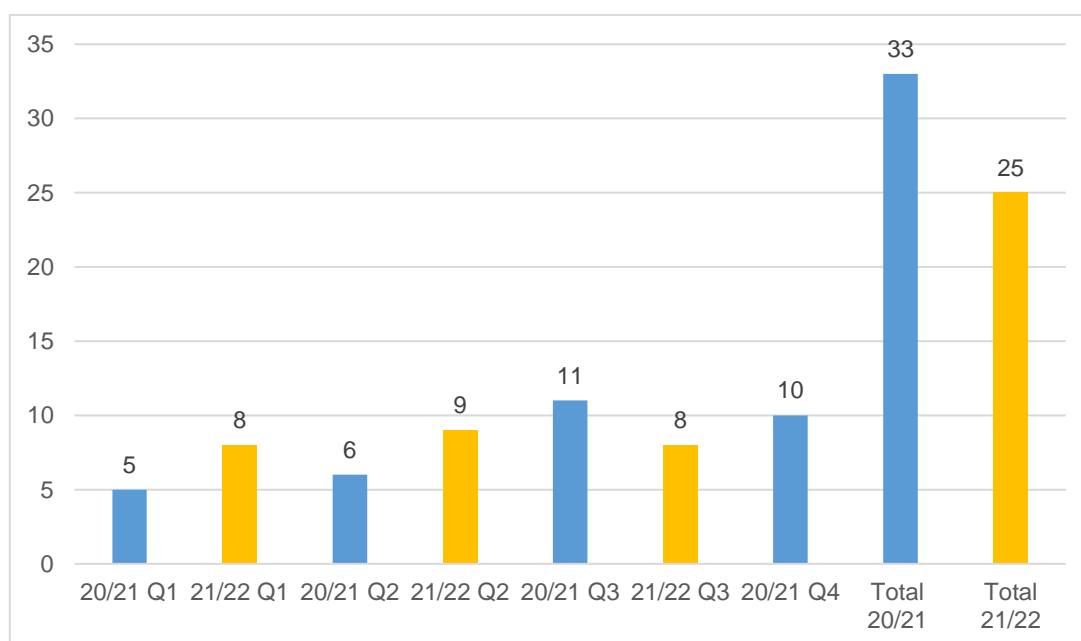
Hosted research is the research where Velindre University NHS Trust provides the clinical environment, capabilities and patient care in the conduct of the research. The vast majority of active hosted studies are from external Sponsor organisations.

Up to the end of Quarter 3 of Financial Year 2021/22, the Trust hosted research portfolio is as follows:

Metric Description	Year to date
Number of studies opened in Velindre University NHS Trust (Total)	25
Number of participants recruited to studies open in Velindre University NHS Trust (Total)	233

2.2.2.1 Graph showing quarter by quarter (& year total) number of studies opened

The following graph shows the total number of studies opened in Velindre University NHS Trust quarter by quarter (and year total) compared to the previous financial year.



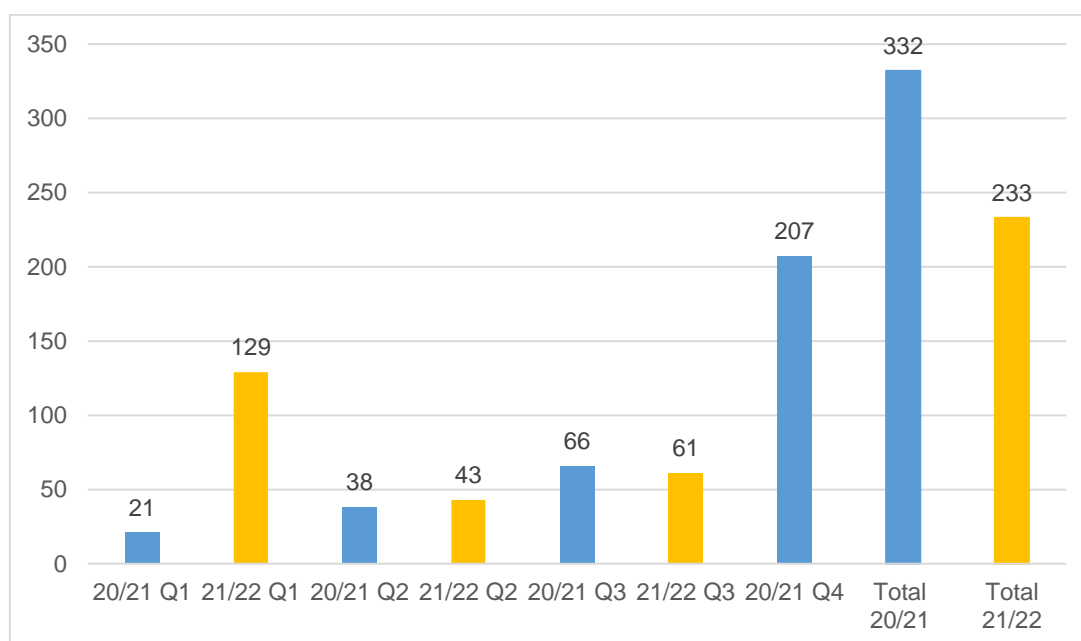
In the Graph 3.3.1, above the blue bars represent the number of studies opened in Velindre University NHS Trust quarter by quarter (and cumulative total) for the financial year 2020/21. The yellow bars represent the number of studies opened in Velindre University NHS Trust quarter by quarter (and cumulative total for the financial year 2021/22).

The data reports that for the third quarter of 2021/22, Velindre University NHS Trust has opened 8 studies, compared to opening 11 studies over the same quarter in the previous financial year 2020/21. This equates to a decrease of 3 studies opening during the third quarters of financial year 2021/22, compared to third quarter of financial year 2020/21.

However, up to the third quarter of 2021/22 the Trust has opened 25 studies compared to 22 studies up to the third quarter of 2020/21.

2.2.2.2 Graph showing quarter by quarter (& year total) number of participants recruited

The following graph shows the total number of participants recruited to studies at Velindre University NHS Trust quarter by quarter (and year total) compared to the previous financial year.



In the Graph 3.3.2, above the blue bars represent the number of participants recruited to studies in Velindre University NHS Trust quarter by quarter (and cumulative total) for the financial year 2020/21. The yellow bars represent the number of recruited to studies in Velindre University NHS Trust quarter by quarter (and cumulative total for the financial year 2021/22).

The data reports that for the third quarter of 2021/22, Velindre University NHS Trust has recruited 61 participants to studies, compared to recruiting 66 participants to studies in the same quarter in the previous financial year 2020/21. This equates to a decrease 5 participants recruited to studies during third quarter of financial year 2021/22, compared to the third quarter of financial year 2020/21.

However, up to the third quarter of 2021/22 the Trust has recruited 233 participants to studies compared to 125 participants up to the third quarter of 2020/21.

2.3 Finance


2.3.1 Background / Context

The RD&I Division's Financial Plan was set within the following context:

- For 2021/22 budget targets were set:
 - to attract £3.3m income, including:
 - £2.8m of infrastructure funding mainly from commercial trial reimbursements, Welsh Government R&D support and funding from Velindre Charitable Funds;
 - Project-specific funding from a wide range of funders including AstraZeneca, Innovate UK, Cancer Research Wales, Cardiff University and Velindre's Advancing Radiotherapy Fund.
 - to spend £2.9m, of which over 90% is for staff salaries: the remainder being used for securing clinical and non-clinical support services and supplies from a variety of other organisations;
 - to manage a further approx. £1m, held in grant funding from external bodies such as Cancer Research UK, which is applied to specific research trials sponsored by VUNHST with payments being made to participating sites around the UK and our partner organisation: the Centre for Trials Research at Cardiff University.

2.3.2 Summary of Performance against Key Financial Targets

Table 1: Key Financial Target 1: to remain within monthly budget expectations

		£000				
		PAY	NON PAY	INCOME	TOTAL	
 Month 8	Budget	249	54	-339	-36	
	Actual	219	50	-305	-36	
	Variance	-30	-5	35	0	In-Month Variance
	Budget	1,806	179	-1,948	72	

Year to Date	Actual	1,767	177	-1,908	72	
	Variance	-39	-2	40	0	To-Date Variance
Forecast Outturn	Budget	2,625	281	-3,271	-365	
	Outturn	2,550	265	-3,179	-365	
	Variance	-75	-16	92	0	Forecast Variance

Table 2: Key Financial Target 2: to pay 95% of non-NHS invoices within 30 days

	Current Month	Year to Date	Forecast Outturn
% Compliance	100%	98.4%	>95%

2.3.3 Analysis of Performance to Date and Forecast Outturn

After 8 months, performance remains close to the budget plan, with no overall variance reported:

- Pay: Spend is moderately below target at £39k underspent due to higher than expected vacancy levels mainly in the trials delivery team;
- Non-pay: Spend is very close to plan at £2k below target; and
- Income: Receipts are moderately below target at £40k below plan. This is a direct matching to the pay underspend, which means less funding will need to be drawn down from funding sources to support the trials delivery team.

The Division forecasts it will meet its overall financial target.

The overall risk of not achieving the target is now very low:

- Income reimbursement from commercial and other funded trials has been maintained despite COVID challenges;
- The receipt of an AstraZeneca FAKTION licensing agreement milestone payment (£165k) remains low risk. The milestones that trigger this payment are currently on track to be delivered to AstraZeneca and the funding to be received in year.

2.3.4 Pay Analysis by Staff Group

PAY GROUP	Cumulative			Year End Forecast		
	£39k Underspend			£75k Underspend		
	YTD	YTD	YTD	Full Year	Full Year	Forecast
	Budget	Actual	Variance	Budget	Forecast	Variance
	(£'000)	(£'000)	(£'000)	(£'000)	(£'000)	(£'000)
Professional Scientific & Technical	36	36	0	36	36	0

Additional Clinical Services	50	44	-5	74	65	-10
Administrative & Clerical	767	740	-27	1152	1071	-81
Allied Health Professionals	35	35	0	52	52	0
Healthcare Scientists	103	103	0	120	120	0
Medical	272	244	-27	394	351	-44
Nursing	631	565	-66	928	854	-73
Vacancy Factor	-88	0	88	-132	0	132
Total	1,806	1,767	-39	2,625	2,550	-75

- Pay underspends are the result of temporary vacancies arising across several areas, which in total have exceeded the prudent estimate made in the budget.

2.3.5 Non Pay Analysis by Category

NON PAY CATEGORY	Cumulative £2k Underspend			Year End Forecast £16k Underspend		
	YTD	YTD	YTD	Full Year	Full Year	Forecast
	Budget (£'000)	Actual (£'000)	Variance (£'000)	Budget (£'000)	Forecast (£'000)	Variance (£'000)
Clinical/General Services/Supplies	133	117	-16	229	193	-36
Maintenance & Repairs	0	1	1	0	1	1
Transport	0	5	5	0	7	7
Printing / Stationary / Postage	5	8	3	5	9	4
Travel & Subsistence	0	0	0	5	6	1
Education & Development	22	25	3	22	27	5
Equipment & Consumables	0	2	2	0	3	3
Computer Maintenance & Supplies	20	20	0	20	20	0
Total	179	177	-2	281	265	-16

- A modest non-pay underspend is mainly due to the impact of COVID on patient activity where fewer support services have needed to be purchased in.

2.3.6 Income Analysis by Category

INCOME CATEGORY	Cumulative £40k underachievement			Year End Forecast £92k underachievement		
	YTD	YTD	YTD	Full Year	Full Year	Forecast
	Budget (£'000)	Actual (£'000)	Variance (£'000)	Budget (£'000)	Forecast (£'000)	Variance (£'000)
HCRW Support Funding	-643	-643	0	-965	-997	-32
Trial Reimbursements	-491	-491	0	-657	-657	0
Charitable Income - Infrastructure	-208	-208	0	-578	-578	0
Grant Funding for Projects	-394	-394	0	-465	-465	0
Milestone payments (AZ)	0	0	0	-165	-165	0
Other Income	-212	-172	40	-441	-317	124
Total	1,948	1,908	40	3,271	3,179	92

- Income recovery has proceeded well to Month 8, and no adverse circumstances are anticipated in the remaining months.

- Health & Care Research Wales have agreed an additional £32k funding in relation to COVID costs of maintaining research studies.
- Note, however, that income plans are adjusted through the year so as to maintain an overall balance with expenditure. At Month 8, actual expenditure is moderately below budget and is forecast to continue on this trend as described above. Therefore a corresponding reduction in income drawdown has been made at Month 8 and a further reduction is planned towards the end of the year from one or more funding sources. Until exact plans are firmed up in the final months, this is included under the “Other income” heading above.

2.4 Velindre Futures Cancer RD&I Ambitions

2.4.1 Velindre Cancer Centre

A cancer research specific **Strategic Leadership Group** (SLG) has been established within Velindre Cancer Centre. The Group has a remit for collective strategic oversight for the delivery of the cancer R&D ambitions. The Group’s Terms of Reference (ToR) are in the process of being finalised.

To support the implementation of Velindre Futures RD&I Cancer Ambitions a small team (currently funded for 2 years) has been appointed. All posts are now appointed and last team member joining the Trust in mid-January 2022

2.4.2 Cardiff Cancer Research Hub (CCRH) – A Tripartite Approach

Excellent progress has been made regarding the development of a Cardiff Cancer Research Hub (CCRH).

An output of this work has been the development of a Clinical Output Specification and work plan for the CCRH. This has been developed by the three organisations, Cardiff & Vale University Health Board (CVUHB), Cardiff University (CU) and Velindre University NHS Trust (VUNHST). The document details the future service model, a plan for a phased approach and includes both the infrastructure and workforce that will be required to deliver research success. This document will be scrutinised and considered by the three organisations and move through respective organisational governance processes.

A CCRH Project Board will be established (inaugural meeting planned mid-January 2022) to provide project governance and oversight to this work.

There are ongoing discussions regarding the development of business cases for Clinical Academic and Clinical Scientist (Solid Tumour and Haem Onc) with the NHS (CVUHB / VUNHST) and Cardiff University. Also, discussions are already underway with the Wales Cancer Research Centre, Experimental Cancer Medicine Centre Cardiff, Advanced Therapies Wales and Health and Care Research Wales, whose work programmes align with the CCRH’s ambitions.

Finally, there are ongoing discussions between the Trust and the Joint Research Office (CVUHB and CU) to scope opportunities and mutual benefits to working together.

2.4.3 University Health Board Partner Discussions

In terms of Velindre@ Research Facilities in partner University Health Boards there are ongoing discussions with the Aneurin Bevan University Health Board (ABUHB) Research and Development team to determine the best strategic direction to enhance cancer research in partnership, including workforce models to support cancer research. At Cwm Taf Morgannwg University Health Board (CTMUHB), a meeting has taken place with the Director for R&D and established a commitment to work together. At CVUHB, the current focus is on the CCRH described in 2.4.2 above.

2.5 Nursing and Interdisciplinary Research

2.5.1 Progress in building nursing and interdisciplinary research

On 01 July 2020, Velindre University NHS Trust (VUNHST) entered a partnership with the School of Healthcare Sciences, Cardiff University, to build research capacity in nurse, allied health professional and healthcare scientist staff groups at the Velindre Cancer Centre, Cardiff.

The Velindre **ambition** for nurse, allied health professional and healthcare scientist cancer research:

Velindre Cancer Centre will have an established Welsh hub recognised nationally and internationally for research and innovation in interdisciplinary research.

The Velindre interdisciplinary research hub will be home for a programme of externally funded research and innovation that aligns with strategies within both Velindre University NHS Trust and Cardiff University. It will provide opportunities for nurses, allied health professionals and healthcare scientists to engage in and take forward cancer care research alongside clinical practice.

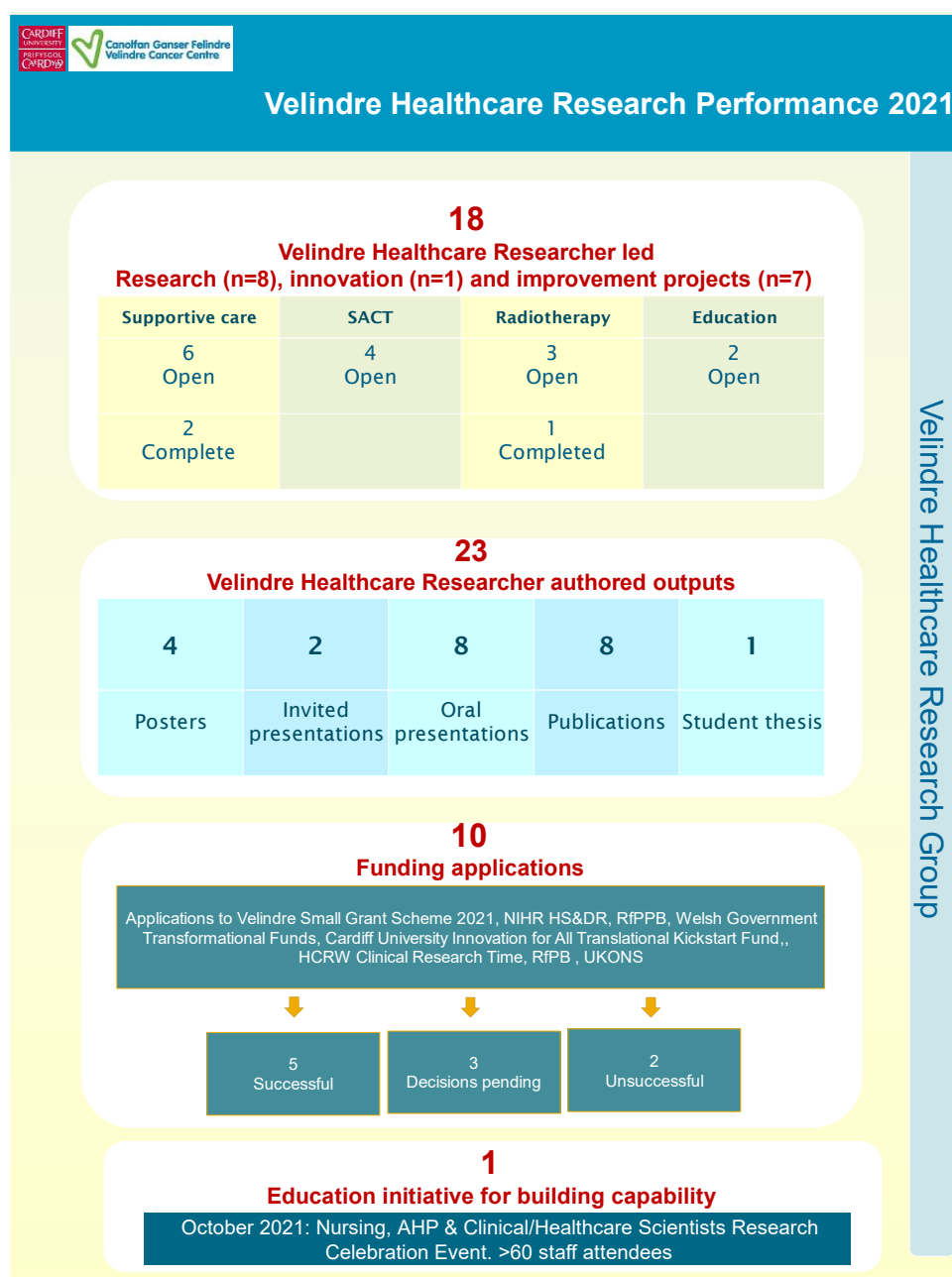
Having entered into the partnership the following progress has been made to support and build nursing and interdisciplinary research in the Trust:

Financial Year	Qtr	Progress
2020/21	3	<ul style="list-style-type: none"> Research mentorship and supervision available to nurses and Allied Health Professionals (AHP) provided by Professor Jane Hopkinson and the Healthcare Cancer Research Group, Cardiff University. Signposting and liaison provided by Jane Darmanin, Senior Manager in RD&I Partnership Engagements.
	4	<ul style="list-style-type: none"> Baseline assessment of VUNHST research portfolio activity with research led by a Nurse or Allied Health Professional.
2021/22	1	<ul style="list-style-type: none"> Cardiff University Healthcare Cancer Research Group seminars open to Velindre Cancer Centre (VCC) staff. School of Healthcare Sciences support for an All Wales Cancer Research Radiographer Group secured and partnering with Velindre.
	2	<ul style="list-style-type: none"> Velindre University NHS Trust Small Grant Scheme launched to kick start Nursing, Allied Health Professional and Health Science research and development during 2021/22.

Financial Year	Qtr	Progress
		<ul style="list-style-type: none"> Velindre Cancer Care Research Associate take up post.
		<ul style="list-style-type: none"> Cardiff Metropolitan University seek placement of two MSc Psychology students within Velindre Cancer Centre Nursing, AHP and Clinical/Healthcare Scientists Research Celebration Event held in October 2021. Welcome given by Professor Donna Mead, Trust Chair and Guest Speaker, Professor Bridget Johnston FRCN, Clinical Professor of Nursing and Palliative University of Glasgow and Chief Nurse Research, NHS Greater Glasgow & Clyde.

2.5.2 Performance at December 2021

The following infographic shows the Velindre Healthcare Research Performance at December 2021:



2.6 Innovation

2.6.1 Key highlights and achievements

The key highlights for innovation this quarter was Velindre in partnership with the All-Wales Genomic Service (AWMGS) won the prestigious NHS Wales 'Scaling up Innovation and Transformation Award'. The partnership developed an innovative new test that can reduce adverse reactions to chemotherapy medications by screening patients in advance of treatment to identify those at risk of severe side effects. The test uses genetic variants to predict the likelihood that a particular drug may cause unintended harm through an adverse reaction.



Adverse reactions to medications account for 6.5% of UK hospital admissions and cost the NHS c£466m annually. Pharmacogenetic testing is a new innovative field and the test is the first pharmacogenetics test to be commissioned for use by the NHS. As a result, Wales has become the first country in the UK to routinely screen all cancer patients being treated with certain types of chemotherapy.

A pilot began in January 2020 and the test and testing pathway were developed, along with clinical guideline documents and education packages. To date, more than 2000 patients have been screened and a total of 225 patients in Wales have had their chemotherapy treatment stratified, therefore reducing their risk of an ADR. It is likely that deaths will have already been prevented by the testing.

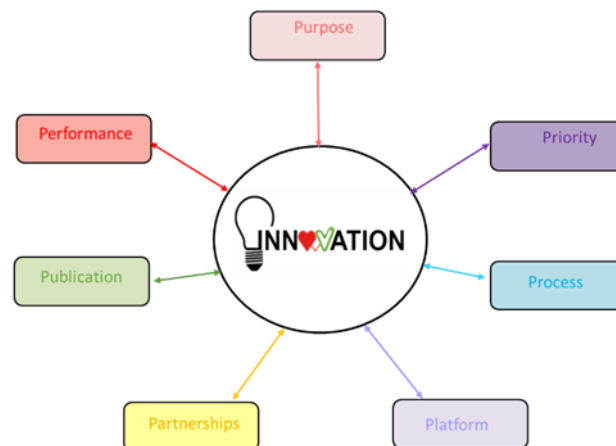
2.6.2 Innovation

The third quarter for the innovation team has seen a significant increase in the number of innovation projects supported, partnership agreements developed and Velindre promoted as an innovative organisation through prestigious awards and presentations at significant external events. The new VCC is also at a critical design stage and TCS/nVCC team are significantly promoting and embracing innovative thinking. The WBS component RD&I lab launch and ambition was another highlight this quarter.

2.6.3 Purpose and Strategic Developments

At a policy level, Welsh Government has been carrying out an engagement exercise to develop both a cross department innovation policy and a new health innovation policy. The later will aim to create a new and consolidated innovation programme to accelerate innovation across NHS Wales.

The Velindre UNHS Trust Innovation Plan developed through wide internal consultation is now receiving positive feedback from external partners.



2.6.4 Priority – Themes

Work is still required to prioritise of Value Based Innovation Themes. These include:

Cross Cutting

- Patient Outcome and experience - Clinical Measures, PROMs & PREMs
- Emerging Technology
 - AI
 - Robotics
 - Immersive Tech - VR/AR
 - Integration
 - Wearables
 - Informatics inc. BI
- Commercialisation to spin-out
- Workforce Innovation – culture & smart organisational design linked to Ops Research
- Engagement – community - staff, patient, carers and donors

Velindre Cancer Service

- Primary Care/Public Health Prehab
- Diagnostic – inc. POCT
- Innovative Cancer Treatments and Therapies - linked to RD&I Future Ambitions
- Supportive Care
- Velindre Healthcare Group (Formerly: Nurses, AHPs & Clinical Scientists)
- TCS & nVCC - Non-Clinical
 - Digital
 - CFFL&I
 - Arts MDT developed
 - RD&I – non-clinical

- Future Gen
- Green Tech - advanced & emerging digital & Information
- Green Solutions
- Social Innovation - Community Benefit
- Palliative

Welsh Blood Service

- Components and products
- Stem Cell
- Logistics

2.6.5 Process

The aim is to launch the innovation MDT in partnership with the Charity at the end of quarter 4.

2.6.6 Platform

- **Finance**
 - Expenditure against budgets is currently projecting small underspend
 - Income projection c£230k
 - iFund – draft proposal developed
- **People**
 - Job Description and Case for Innovation Project Manager to go to Charity Q3
 - Trust Exemplars and Fellows – first external fellow proposal in draft
- **Team Development**
 - Rescape Ltd – Trends in VR in Health
 - Team development day
 - Storytelling – Social Care Research Network organised for Q4
 - LSH Introductions
 - IP awareness slide deck developing with AgorIP
- **Toolkits**
 - Ayoa Collab Mindmap Software
 - Miro – Creative process mapping
 - Canva – Creative Presentation
 - Ideas Platform – simple solution tested on beta website
 - Single Project Database – development begun
- **Communications Plan**
 - Website – future URLs secured
 - Induction Video – 15 minutes
 - iAwareness session – 30 minutes
 - Exemplar and Fellow Education Routes
- **IP and Commercialisation**
 - Training Slide Deck

- Velindre innovation templates NDA and MOUs developed
- **iSpace**
 - Welsh Blood – excellent facilities – post COVID
 - VCC – no progress

2.6.7 Partnerships

- **Industry**
 - Pfizer - NDA
 - Meridian
 - IBM
 - Roche
 - Medtronic
 - Merck/MSD
 - JIVA AI - NDA
 - IQHealth - NDA
 - Reshape/Orchard – MOU to-do
 - OpenGenius – MOU
- **Academia**
 - **Cardiff Met**
 - New PhD – WBS – Platelets
 - Developing links to the Stroke Hub – Innovation
 - Cardiff University
 - New AI group
 - SSC Placements - Med Students
 - **University of Wales Trinity St David**
 - Drafted MOU
 - **University of South Wales**
 - Welsh Institute of Health and Social Care - Integrated Care Team
 - **Swansea University**
 - AGOR IP
 - PhD – Values Based Health Care - AI – PREMS - PROMS
 - Bevan & Innovation ILA
 - ILA PhD Fellow – Dr Button
 - RD/Velindre iWales - Mentoring Exemplars
 - George Morris - Automating Thermoluminescent Dosimetry (TLD) Badge distribution to improve the Radiation Monitoring of Individuals Working with and Around Radiation.
 - Margaret James - Cluster Pharmacist Discharge Medication Reconciliation in General Practice
 - KESS Masters Student – Rebecca Summers - Value Based Health Care
- **3RD SECTOR**

- RiTTA Engagement
- Tenovus
- MacMillan
- Velindre Charity
- Wales Cancer Network
- Innovation and Improvement Challenge Support & Judging
- **Other Partners**
 - Innovation Leads – representing the Trust
 - Life Sciences Hub – account manager established for Velindre Innovation
 - MediWales – Joined in Q3

2.6.8 Publication – Promotion - Presentations

- RiTTA
 - Royal College of Radiologists – AI Session Invited to Present
 - Global AI Med Network Events – two 2 panel appearances
 - Military Covenant Awards
 - WBS Away day – innovation session
 - Velindre Grand Round – Health Technology Wales & Innovation Update
 - NHS Wales Innovation Awards – Winners in Scaling up Innovation
- https://www.youtube.com/watch?v=DDe7E_G6gNE&list=PLFz91WHnjCKROYrSFcCFf8uq53E6pC4IC&index=9

2.6.9 Performance

2.6.9.1 Led projects

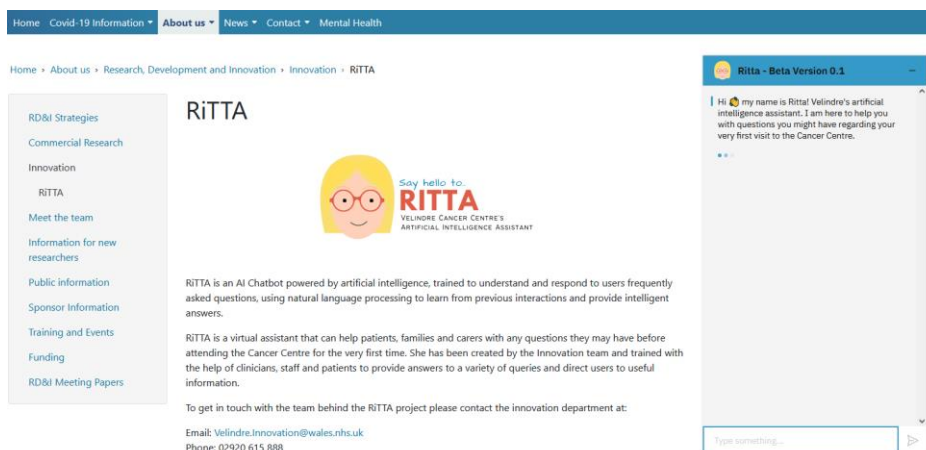
RiTTA

Webpage

One of the major challenges and barriers to the project was the ability to host it within the MURA platform in readiness for the live launch and making it accessible to our users. Due to limited technical experience of MURA within the Trust due to staff departures, the Innovation team requested access and have now achieved this major milestone by deploying and embedding the assistant within a newly created webpage on the VUNHST website.

Beta Testing

RiTTA is currently in Beta testing; this is the final round of testing before releasing to a wide audience. The purpose is to use a real environment and users to uncover any bugs or issues before a general release in early 2022. The use of a live feedback form within the assistant also enables us to capture this information directly from our patient testing groups.



Feedback

Fifty-four users have completed the feedback form with the data showing:

- 85% of users believe the Chatbot should be made available to patients awaiting their first appointment
- 75% of users scored RiTTA's performance 7 or above on a 10 point Likert scale

Development Support

Loss of technical support with the departure of Meridian IT from the project left the development work entirely in-house. An agreement has now been reached with IBM through a statement of work package to provide technical assistance and development expertise as and when it is needed by the project team. This agreement is set to be finalised before the New Year.

Collaboration

We have collaborated with a variety of technology, healthcare and academic partners throughout the project. In December we have added to these through engaging with Macmillan Cancer Support. Discussions have taken place with the charity to signpost to their support services and provide content to be used in RiTTA's dialogue responses. Full list of collaborators shown in the image below:



2.6.9.2 Supported projects

- RIIC Hub – v2 – New Innovation Partnership
- Clinical Audit System
- Mindfulness App
- Training Game – Palliative – IP Protect and Commercialise
- Small Grants – Taste App – Jane Mathlin (S)
- Arts Gang
- RD – PI – NIHR i4i – OBD

2.7 Health and Care Standards

The RD&I Division is responsible for the Standard 3.3 Quality Improvement, Research and Innovation of the Health and Care Standards. This standard assesses “Services engage in activities to continuously improve by developing and implementing innovative ways of delivering care. This includes supporting research and ensuring that it enhances the efficiency and effectiveness of services.”

Up to the end of Quarter 3 of Financial Year 2021/22, the status of the Health and Care Standard 3.3 as follows:

Area	Score 2020-21				
Velindre Cancer Centre	Insert score from last year's assessment				
	1	2	3	4	5
				X	
	Score 2021-22				
	Insert presumed score for the coming year				
	1	2	3	4	5
					X

Area	Score 2020-21				
Welsh Blood Service	Insert score from last year's assessment				
	1	2	3	4	5
					X
	Score 2021-22				
	Insert presumed score for the coming year				
	1	2	3	4	5
					X

The 2021/22 Self-Assessment Tools for Quarter 3 from both Velindre Cancer Centre and Welsh Blood Service are due to be submitted for consideration and reporting by 31 January 2022.

3 Welsh Blood Service

The RD&I Vision of the Welsh Blood Service will advance donor care, transfusion and transplantation medicine through the inception and participation in high-quality health services research. Our vision for the Welsh Blood Service is an organisation where high-quality research and development is performed as part of our normal day-to-day activity. To ensure our research efforts achieve the best outcome for donors and patients, collaborative work with clinicians will be encouraged wherever possible.

3.1 Key highlights and achievements

3.1.1 Launching the Component Development Research Laboratory

This autumn, the Welsh Blood Service launched a new facility. The Component Development Research Laboratory which will provide us with the facilities and capacity to realise our ambition of being a centre of excellence in blood component advancement. Manufacturing space has been transformed into a dedicated facility, and state-of-the-art equipment, such as the Seahorse XF Technology, have been commissioned. A small team of specialist scientists has been recruited with an ambition to grow further as the research program develops.

The laboratory will perform a wide range of functions. It will lead the service on the implementation of changes to components regulations. It will also research and develop innovative technologies for blood manufacturing, investigating new methodologies, and producing novel components. The work of the laboratory will also be able to advise the organisation on horizon scanning and potential future strategies for component development.

Even though the formal launch event took place in Q3, the laboratory already has a history of success. It has been delivering the Products theme of the WBS's RD&I Strategy for some time now. Several academic and healthcare partnerships are already underway. One of the first outputs will be a thesis from Cardiff Metropolitan University in Platelet Storage Lesion. This is the outcome of a KESS2 PhD studentship that the Welsh Blood Service has supported.

3.2 WBS RD&I Project Portfolio Highlights

Project Title: Development of a predictive biomarker profile to stratify the response of potential kidney recipients to antibody reduction and immune modulation

News: This project has now achieved sponsorship approval and the project practical work has commenced. The literature review has been published in a peer-reviewed journal.

Project Title: Sero-surveillance for SARS-CoV-2 infection in blood donors in Wales

News Surveillance will continue examining the levels of population immunity in this surrogate measure and is exploring the vaccine-mediated versus innate immunity in

Wales. Over 25,000+ bio samples have been transferred to Public Health Wales from Welsh Blood Service for this endeavour to date.

Project Title: Evaluation of a novel monoclonal anti-Vel antibody for pre-screening Vel-negative red blood cells in blood samples

News: This collaboration with Sanquin (Dutch Blood Service) has performed well, passing its initial manual validation. We anticipate a further request to continue to the next phase of the investigation where the use of this antibody in an automated testing system will be evaluated.

3.3 WBS RD&I Project Portfolio Metrics

Metric Description	As of 01 Dec 2021
Number of NHS Research studies	1
Number of active WBS-manager RD&I Projects	15
In the	
• Transplantation RD&I Theme	5
• Donor Care and Public Health RD&I Theme	2
• Products RD&I	7
• Therapies RD&I	1
WBS Staff supporting active RD&I	45

Metric Description	Year to date
Closed projects	10
Awaiting Outcomes	0
Completed Outcomes	10

Metric Description	Year to date
Publications	27
Full Journal	10
Oral Conference Poster	4
Conference Poster	11
Thesis	2

4 Velindre Cancer Centre

This section of the report includes information on national and global achievements for research activities under Velindre Cancer Centre

This part of the report contains data taken from:

- Study newsletters and press releases
- Performance data taken from the Local Performance Management System (LPMS) – (data cut 24 December 2021)

4.1 Key highlights and achievements

4.1.1 CLEAR

Study Title: Multicenter, Open-label, Randomized, Phase 3 Trial to Compare the Efficacy and Safety of Lenvatinib in Combination with Everolimus or Pembrolizumab Versus Sunitinib Alone in First-Line Treatment of Subjects with Advanced Renal Cell Carcinoma

On 10 August 2021, the US Food and Drug Administration (FDA) granted approval of the combination lenvatinib plus pembrolizumab in the US for the first-line treatment of adult patients with advanced renal cell carcinoma. This decision was based on the initial findings of the CLEAR study, for which the Trust had been a research site. The CLEAR study demonstrated statistically significant reduced risk of disease progression or death by 61% versus sunitinib.

4.1.2 Other news

CompARE	
Study Title:	Phase III randomised controlled trial comparing Alternative Regimens for escalating treatment of intermediate and high-risk oropharyngeal cancer
News:	Velindre was the top UK recruiting site for 3 months in a row (September 2021 to November 2021).

BRIOChe	
Study Title:	Radiotherapy outlining, planning, treatment delivery and QA guidelines
News:	Velindre was the second UK site to open to recruitment. The Sponsor are currently opening 16 sites across the UK.

COVID Immune	
Study Title:	Examining the effect of vaccination on both SARS-CoV2-specific T cell and antibody responses in cancer patients
News:	<p>The study has been published as an article in the Journal of Immunology.</p> <p>The article can be accessed via the following link: https://onlinelibrary.wiley.com/doi/10.1111/imm.13433</p>

4.1.3 Study performance rankings

Ranking	Study Title	Summary
Top UK Recruiter	CONCORDE	A platform study of DNA damage response inhibitors in combination with conventional radiotherapy in non-small cell lung cancer
2 nd Highest UK Recruiter	PARTNER	Randomised, phase II/III, 3 stage trial to evaluate the safety and efficacy of the addition of olaparib to platinum-based neoadjuvant chemotherapy in breast cancer patients with TNBC and/or gBRCA.
3 rd Highest UK Recruiter	TRITON 3	A Multicenter, Randomized, Open-label Phase 3 Study of Rucaparib versus Physician's Choice of Therapy for Patients with Metastatic Castration-resistant Prostate Cancer Associated with Homologous Recombination Deficiency

Ranking	Study Title	Summary
Joint 7 th Highest UK Recruiter	ATLANTIS	An adaptive multi-arm phase II trial of maintenance targeted therapy after chemotherapy in metastatic urothelial cancer
7 th Highest UK Recruiter	ABC-07	Addition of stereotactic radiotherapy to systemic chemotherapy in locally advanced biliary tract cancers
9 th Highest UK Recruiter	COPELIA	A 3-Arm Randomised Phase II Evaluation of Cediranib in Combination with Weekly Paclitaxel or Olaparib Versus Weekly Paclitaxel Chemotherapy for Advanced Endometrial Carcinoma or for disease relapse within 18 months of adjuvant carboplatin-paclitaxel chemotherapy

4.2 Operational plan 2020/21 to 2021/22

Up to the end of Quarter 3 of Financial Year 2021/22, the status of the projects from the Operational Operation Plan 2020/21 to 2021/22 is as follows:

Code	Project	Status
A1	Publish a Trust Research, Development & Innovation Strategy	Green
A2	Publish an annual operational plan for the Trust RD&I division that links to the Trust RD&I strategy	Green
A3	Work with the Trust Communications team to collaborate with Health and Care Research Wales to update/redevelop the Trust RD&I communications and web pages	Green
A4	Create and publish a quality manual transforming RD&I division's procedures and staffing structure to better facilitate research, development and innovation delivery	Green
A5	Implement a study adoption tool to support decisions about the studies the Trust wishes to sponsor and/or host as part of its research study portfolio	Green
A6	Review and improve procedures for data management including data capture and data quality	Green
A7	Monitor the development of the CaNISC replacement to ensure that the new system meets the statutory and regulatory requirements associated with research.	Amber
A8	Implement an income distribution model for Trust research	Amber
A9	Develop guidance/processes for the Trust to licence intellectual property arising from its sponsored non-commercial portfolio as appropriate	Amber
A10	Develop a plan to ensure the Trust has the capability to deliver vaccine research both in its own right and as part of Health and Care Research Wales vaccine infrastructure	Green
A11	Explore new collaborative partnerships and encourage overarching agreements with partners to facilitate research	Green

4.2.1 Monitor the development of the CaNISC replacement

RD&I are represented at both the DH&CR Project Board and Implementation Group. Representation is as follows:

- Senior Leadership Team – delegated to CCJ
- Work stream operational lead – CB
- Work stream operational representative - JR

Additional staff will support the implementation as the DH&CR project progresses.

The Trust has made a decision to delay the implementation to May 2022 at risk, from the original planned September 2021.

4.2.2 Implement an income distribution model for Trust research

The work to implement an income distribution model that ensures that research income is appropriately distributed within the Trust was previously delayed due to COVID19. This work has been restarted during the financial year 2021/22.

4.2.3 Develop guidance/processes for the Trust to licence intellectual property

The work to develop a procedure that allows the Trust to licence intellectual property arising from the Trust's sponsored non-commercial portfolio was previously delayed due to COVID19. This work has been restarted during the financial year 2021/22.

Velindre University NHS Trust

Research, Development & Innovation (RD&I) Sub-committee

Annual Report 2021



Ymddiriedolaeth GIG
Prifysgol Felindre
Velindre University
NHS Trust



Canolfan Ganser Felindre
Velindre Cancer Centre



Gwasanaeth Gwaed Cymru
Welsh Blood Service

Table of Contents

Section	Title	Page Number
1	Introduction	4
2	Roles and Responsibilities	5
3	Agenda Planning Process	5
4	Terms of Reference and Operating Arrangements	6
5	Membership, Frequency, and Attendance	6
6	Research, Development & Innovation Sub-Committee Activity	8
6.1	<i>Velindre Futures Cancer RD&I Ambitions</i>	9
6.2	<i>COVID19 Pandemic</i>	9
6.3	<i>Head of Innovation</i>	11
6.4	<i>Nursing and Interdisciplinary led research</i>	11
6.5	<i>Trust RD&I Small Grant Scheme</i>	11
6.6	<i>“One Site Wales” model of research delivery and SYMPLIFY study</i>	12
6.7	<i>Component Development Research Laboratory</i>	13
6.8	<i>Divisional Assurance Mechanisms and Reports</i>	13
6.9	<i>Presentations</i>	14
6.10	<i>Policy Approvals</i>	14
6.11	<i>External Reviews, Internal Audit Reviews and Reports</i>	15
6.12	<i>Endorsements/Approvals</i>	15
6.13	<i>Strategy, Policy Implementation and Performance</i>	15
7	Discussion held in Part B / Private Committee	16
8	Reporting and Committee’s work	17
9	Annual Committee Effectiveness Survey	17
10	Conclusions and Way Forward	36



**Professor Donna Mead,
OBE, CStJ.**

**Trust Chair and
Chair of the RD&I
Sub-committee (2021)**

Insert Message here ...

Donna Mead



**Dr. Jacinta Abraham,
Executive Medical Director
and Executive Lead for
Research & Development**

Insert Message here ...

As the Executive lead for Research Development and Innovation I am delighted to see the progress that is demonstrated in this annual report. It has been a time of change with the forming of a new subcommittee, and with it a refreshed agenda with a streamlined Trust performance report. In spite of the constraints with the arrival of the pandemic, we have continued to excel in research study recruitment and have made several new key appointments and successful developments to celebrate. The component laboratory set up at WBS is one example of this success that has huge potential looking forward. I am also immensely proud of the work that has culminated in the approval of a 10 year Velindre Cancer Research ambition , which has put Velindre in a leadership position to influence Cancer Research in Wales. The investment into clinical leadership across the Trust has strengthened our ability to contribute at a strategic level and ensures that the multidisciplinary clinical workforce has a research voice.

1. Introduction

In September 2020, the Trust Board approved a new Board & Committee model resulting in the move from a top line nine committee model to a five committee model. Amongst a number of key changes, the new model resulted in the revised establishment of the previous Research & Development Committee into a newly formed Research, Development & Innovation (RD&I) Sub-committee.

Under the revised arrangements the RD&I Sub-committee acts as the “front door” for all RD&I business at Board level, with the right expertise around the table. In addition, a key aim of the newly established RD&I Sub-committee is to act as the point in the organisation where the quality of RD&I bids are assessed from a strategic alignment; science; ethics and value for money perspective feeding into three overarching Committees of the Trust Board, namely:

- i. Quality, Safety & Performance Committee – for assurance of the performance of research and development.
- ii. Strategic Development Committee – for innovation and RD&I strategy overall.
- iii. Charitable Funds Committee – for alignment with strategy and funding of business cases.

Under the revised arrangements the RD&I Sub-committee has retained the delegated authority for decision making granted to the previously established Research & Development Committee by the Trust Board.

This Annual Report summarises the key areas of business activity undertaken by the newly established RD&I Sub-committee in its first year of operation, encompassing the period from the 1 January 2021 up to and including the 31 December 2021.

This Annual Report highlights some of the key issues which the RD&I Sub-committee intends to give further consideration to over the next 12 months, as well as the outcome of the 2021 RD&I Sub-committee Annual Effectiveness Survey, together with any opportunities for continuous improvement in the year ahead.

2. Roles and Responsibilities

The primary purpose of the RD&I Sub-committee is to:

- Provide strategy and policy oversight for RD&I activities undertaken by the Trust feeding into its overarching Strategic Development Committee.
- Provide assurance on the performance of Research and Development activity feeding into its overarching Quality, Safety & Performance Committee.
- Promote and encourage a RD&I ethos and culture, integral to the Trust's vision, mission and values.
- Provide assurance to the Board in relation to the Trust's arrangements for ensuring compliance with the UK Policy Frameworks for Health & Social Care Research as amended from time to time.
- Consider relevant matters with reference to the parameters identified for risk appetite in relation to RD&I as set by the Board.

The RD&I Sub-committee meets on a quarterly basis and met four times during the year and received and discussed presentations and reports on matters that fall within its terms of reference.

During 2021, the RD&I Sub-committee business was underpinned and informed through the work of a number of Management Groups, and Governance and Assurance Processes as set out in **Appendix 1**.

3. Agenda Planning Process

In line with the agreed Committee Cycle of Business, the Chair of the RD&I Sub-Committee, in conjunction with the Executive Medical Director, Head of Research & Development and the Head of Corporate Governance, set the agenda for Committee meetings. The Committee secretariat for the meeting is provided by the Business Support Officer to the Executive Medical Director.

The Committee's agenda and meeting papers are disseminated to members and attendees a minimum of ten working days before the meeting, and are also made available on the Trust website. All papers are required to be accompanied by a cover

report which provides a summary of key matters for consideration, and supporting details on the action required by the Committee.

4. Terms of Reference and Operating Arrangements

The Committee's Terms of Reference and Operating Arrangements are reviewed on an annual basis. Their first annual review was due to be completed by the end of December 2021. However, due to the emergence of the prevalence of the Omicron variant and increased demands on Trust officers to respond to the escalating position, this has not been able to be fully progressed at this point in time and has been deferred and will now be progressed in the New Year. This will afford the opportunity for the newly appointed Chair of the RD&I Sub-Committee to undertake a holistic review in conjunction with Trust officers with recommendations and any revisions to the Terms of Reference and Operating Arrangements received at the April 2022 meeting.

5. Membership, Frequency and Attendance

The Committee's Terms of Reference and Operating Arrangements specify that the Committee comprises a minimum of two members including:

- Committee Chair
(Independent Member of the Board)
- One Independent Member of the Board
(Independent Member of the Board - University)

In addition, the Committee is also attended and supported in its operating arrangements by:

- Executive Director with responsibility for RD&I currently Medical Director
- Executive Director of Finance or nominated officer with RD&I funding responsibilities
- Associate Medical Director with responsibility for R&D
- Clinical Director (or Nominated Deputy) – Velindre Cancer Centre

- Executive Director of Nursing AHP and Health Sciences
- Head of Corporate Governance
- Head of RD&I Strategy
- Representative - Velindre Cancer Centre Strategic Management Team
- Representative – Welsh Blood Service Strategic Management Team
- WBS RD&I Lead
- Trust Head of Research & Development
- Service User/Lay representatives
- Staff Side Representative

The Committee may also co-opt additional independent ‘external’ members from outside the organisation to provide specialist skills, knowledge and expertise.

During the year, the Committee met on four occasions with attendance by its Members as outlined below:

Members	Committee Attendance				Attendance
	Date 27/01/21	Date 28/04/21	Date 22/07/21	Date 21/10/21	
Prof. Donna Mead OBE, CStJ. (Chair of the Committee for the reporting period)	✓	✓	✓	✓	100%
Prof. Donald Fraser (Independent Member of the Board – University) <i>[Jan 2021 – Aug 2021]</i>	✓	✓	✓	N/A	100%
Prof. Andy Westwell (Independent Member of the Board – University) <i>[Aug 2021 – present]</i>	N/A	N/A	N/A	✓	100%

6. RD&I Sub-committee Activity

The Trust's strategic approach to Research, Development and Innovation (RD&I) is informed by patient need, strategic funding priorities and staff RD&I expertise at a national and local level and is underpinned by established RD&I processes: robust research governance, performance monitoring and quality assurance mechanisms; increasing service improvements and knowledge and expertise amongst staff.

The Sub-Committees Cycle of Business is configured to obtain assurance, on behalf of the Board, in relation to Trust activities within the Committee's scope.

In its first year the RD&I Sub-Committee supported the collaborative work plans of the divisions of the Trust – the RD&I Division, Welsh Blood Service (WBS) and Velindre Cancer Centre (VCC), and where appropriate the Trust's collaboration with key stakeholder organisations within the NHS and Higher Education Institutions.

For 2021, the RD&I Sub-committee has fulfilled its core work programme with the following key priorities continuing to provide focus for the Sub-Committee:

- The continued development of one Trust-wide Research, Development & Innovation (RD&I) Strategy and implementation plan.
- Provision of a robust governance framework and infrastructure to support the Trust's RD&I agenda.
- Assuring the RD&I arrangements support the delivery of the RD&I agenda.
- Reviewing the resources available to support within the Trust
- Ensuring the Trust is fully engaged in national programmes and policies
- Ensuring RD&I related risk is considered and managed appropriately
- The review of RD&I related business cases.
- The monitoring of performance against key RD&I deliverables on behalf of the Trust Board including:
 - The RD&I priorities for the annual Operational Plans
 - Health and Care Research Wales (HCRW) key performance indicators
 - Healthcare Standards Standard 3.3 Quality Improvement, Research and Innovation

- Progress against the Integrated Medium Term Plan (IMTP) / Annual Planning Framework

During 2021, the Committee obtained assurance in relation to a wide range of additional RD&I activities over and above those highlighted, these are summarised below.

6.1 Velindre Futures Cancer R&D Ambitions

The development of a 10 year Velindre Cancer research ambition through the work of the Velindre Futures RD&I group has been a major achievement. This was a multi stake holder group with patient and public representation which met from September 2020 to January 2021 and worked intensely to produce an exciting, shared vision and strategy for cancer research. The Trust Board welcomed and approved the “Overarching Cancer Research and Development Ambitions 2021-31” document in March 2021. These ambitions have complemented very well the research recommendations from the Nuffield Trust’s advice on the proposed model for non-surgical tertiary oncology services in South East Wales which was published in December 2020. It has also since been endorsed by several forums including CREST, the Research Strategy Group for Wales Cancer Collaborative Leadership Group (South East Wales) and is aligned to the UK Future of Clinical Research Delivery Strategy document published in March 2021.

Since the Trust approved the document, work has been ongoing to develop a Velindre Futures RD&I infrastructure to support and develop a detailed implementation plan in partnership with Cardiff University and University Health Board partners across South East Wales. Additionally, the Trust is engaging with Charities, Industry and the Welsh Government as key partners in cancer research across the region and beyond.

6.2 COVID19 Pandemic

In response to the Urgent Public Health COVID19 pandemic, the RD&I Division took action to develop a business continuity plan on behalf of the Trust to manage the research study portfolio during the pandemic.

The Division took action to:

- Halt screening and recruitment activities for all hosted research.
- Not open new research studies except for prioritised COVID19 research and research that provided patient benefit or reduced burden on clinical services.
- Issue guidance to research sites for managing the Trust's sponsored research.

Additionally the Division took action to plan for staff redeployment to other areas of the Trust, as appropriate.

Once the Trust was able, the Division planned the reactivation of the research study portfolio based on an agreed set of key prioritisation principles in three cohorts over a 9 month period. The consultants, as Principal Investigators, responsible for the safe delivery of the research activity confirmed the reactivation programme's prioritisation. Since reactivating the Trust's research study portfolio, the RD&I Division continued to manage the portfolio in line with the NIHR documents, endorsed by the devolved nations.

The Trust's Welsh Blood Service (WBS) Division's blood supply chain provided an outstanding contribution to the collection of, and management of, the supply of convalescent plasma for the REMAP-CAP and RECOVERY research studies. Peter Richardson, Head of Quality Assurance, led on this work within the Welsh Blood Service.

The clinical liaison with Principal Investigators at the RECOVERY study research sites in Wales and the respective blood banks was managed through the Blood Health Team under the leadership of Lee Wong, Head of Department, and Janet Birchall, Medical Director.

The findings reported by RECOVERY in January 2021 showed that convalescent plasma treatment did not show evidence of improving outcomes for moderately ill COVID19 patients. This followed the announcement, also in January 2021, that the UK arm of the REMAP-CAP trial also reported interim findings of no benefit in intensive care patients.

WBS's involvement in these trials to find effective treatments for COVID19 patients cannot be underestimated especially in helping to deliver the world's largest randomised control trial of convalescent plasma.

6.3 Head of Innovation

A full-time Head of Innovation, Robyn Davies, was appointed by the Trust during the third quarter of 2021. Robyn joins the Trust RD&I senior leadership team, further strengthening the Trust's Innovation Service and leading the development of a Trust wide innovation strategy aligned with the Trust 2032 strategy.

6.4 Nursing and Interdisciplinary Led Research

The Trust has recognised that in order to fulfil the requirements in relation to University status there was a need to invest in further strengthening its nursing and interdisciplinary led research portfolio by increasing the nursing, allied health professional (AHP) and clinical scientist research activity.

A Velindre Professor of Nursing and Interdisciplinary Cancer Care was appointed to lead this important initiative supported by a research fellow.

As part of this initiative, in October 2021, the Trust held a successful Nursing, Allied Healthcare Professional (AHPs) and Clinical/Healthcare Scientists Research Celebration Event with the welcome by Professor Donna Mead OBE, Chair of the Trust and guest speaker Professor Bridget Johnston FRCN, Clinical Professor of Nursing and Palliative University of Glasgow and Chief Nurse Research, NHS Greater Glasgow & Clyde.

6.5 Trust RD&I Small Grant Scheme

In order to support an increase in activity in the Nursing and Interdisciplinary led research portfolio the Trust has established an annual Small Grant Scheme. The award for 2021 was £50k, (5 studies of £10k or pro-rata for smaller projects) and will be coordinated and managed by the Trust R&D Office. The scheme seeks to support the

development of nurse, allied health professional and health/clinical science researchers in a multidisciplinary and supportive environment to undertake research aligned to strategic priorities.

In 2021, the scheme launched by Nicola Williams, the Trust's Executive Director of Nursing, AHPs & Health Science, received ten applications. The RD&I Small Grant Scheme award panel was convened in September 2021, chaired by Nicola Williams and consisted of the Trust Chair, Professor Donna Mead OBE, with representation from the Welsh Blood Service and Velindre Cancer Centre to consider applications and determine the awards to be made.

6.6 “One Site Wales” model of research delivery and SYMPLIFY Study

In response to the delivery of Urgent Public Health COVID19 vaccine research studies, Wales developed and implemented a new model of research study delivery – “One Site Wales”.

Velindre capitalised on an opportunity arising from engagement sought from Health and Care Research Wales to lead on the further development and implementation of this “One Site Wales” model outside Urgent Public Health research. The model was tested on a study to assess a multi-cancer early detection test (using GRAIL's Galleri technology), and was sponsored by Oxford University.

Velindre worked with six University Health Boards to set-up and deliver this study with Professor Dean Harris (Swansea Bay UHB) and Professor Tom Crosby (Velindre University NHS Trust) as Principal Investigators. The Study exceeded its recruitment target of 700 patients to be recruited in Wales.

There was very positive feedback from all parties with Professor Kieran Walsh, Director of Health and Care Research Wales, saying:

“SYMPLIFY is a brilliant example of how Wales can work together to provide a meaningful contribution to national life-saving research.

Supporting new cancer diagnosis studies like this one is an essential part of

our commitment to providing the best possible standard of care to the people of Wales.”

Velindre will play a key role in the future development of this model of research delivery in Wales.

6.7 Component Development Research Laboratory

The Welsh Blood Service (WBS) held a successful launch event on 11 October 2021 for the Component Development Research Laboratory (CDRL). The event consisted of a mix of live segments and pre-recorded videos that enabled the involvement of multiple external collaborators and the entirety of the CDRL team.

The event was opened by the Head of Quality Assurance, Peter Richardson, and the Head of the CDRL, Chloe George. The rest of the event included:

- A “Meet the Team” video, putting names to faces and giving some background on the team’s expertise
- Christine Saunders gave a presentation on the CDRL’s interest in cold platelet storage and their ongoing projects.
- Jamie Nash, a KESS 2 PhD candidate, gave a presentation on working with the laboratory on optimising the storage and function of platelets – an example of an excellent partnership between WBS and Cardiff Metropolitan University.
- A virtual laboratory tour of the facilities and insight into the equipment on offer and future investments the laboratory will make.
- Insights from key collaborators that the CDRL supports and discussion on the benefits the research has on patients.
- An open forum on horizon scanning and a question and answer session led by Chloe George and Siân James.

6.8 Divisional Assurance Mechanisms and Reports

The two operational divisions of the Trust, i.e. the Welsh Blood Service and the Velindre Cancer Service, each provided a divisional report to the Research, Development &

Innovation Sub-Committee for assurance. The purpose of each report was to provide the Committee with an update on the key quality, safety and performance outcomes and metrics for the reporting period, together with an overview of key priority areas, any issues, corrective actions and monitoring arrangements in place, together with any service developments planned or underway.

In 2021, the reporting arrangements were reviewed and a Trust RD&I Integrated Performance Report developed. The content of the report now enables a more triangulated and holistic approach by combining research output data with financial and work force information.

The RD&I Sub-Committee approved the format of the first fully integrated Trust RD&I Performance report at their meeting of 21 October 2021. The format of this report will continue to mature and develop in line with Trust business.

6.9 Presentations

The RD&I Sub-Committee has also received a number of presentations throughout its inaugural year. These included those highlighted below:

- Velindre Futures Research & Development Group Strategy (Professor Mererid Evans).
- Velindre Cancer Centre Patient Personal Assistant – RiTTa Chatbot (Professor Peter Barrett-Lee and Mr Ross McLeish).
- Addressing the Platelet Storage Lesion (Dr Edwin Massey and Mr Jamie Nash).

The Sub-Committee also received presentations on a number of Business Cases relating to the supporting and improving research activities in the Trust.

6.10 Policy Approvals

The RD&I Sub-Committee approved the following Trust policy during the inaugural year:

- Intellectual Property (IP) Policy

6.11 External Reviews, Internal Audit Reviews and Reports

The Sub-Committee received and considered external reviews and reports, including:

- Nuffield Trust – Advice on the proposed model for non-surgical tertiary oncology services in South East Wales
- UK Strategy – Saving and improving lives: the future of UK clinical research delivery
- UK Strategy – The Future of UK Clinical Research Delivery: 2021 to 2022 Implementation Plan
- Wales Chief Medical Officer (CMO) letters relating to the management of urgent public health studies and other research study activities during the COVID19 pandemic

6.12 Endorsements / Approvals

The Sub-Committee **ENDORSED** a number of items to support and enable the Trust's ongoing commitment towards quality and excellence in Research, Development and Innovation:

- VUNHST Overarching Cancer Research and Development Ambitions 2021-31
- RD&I Committee Financial Performance Report
- Trust RD&I Integrated Performance Report

6.13 Strategy, Policy Implementation and Performance

The Sub-Committee has sought assurance through regular review and scrutiny of the regularly received RD&I Performance Reports to provide the Sub-Committee with the necessary assurance around performance of the RD&I Division. These provide the Sub-Committee with an update on the key performance outcomes and metrics for the research activity of the Welsh Blood Service and Velindre Cancer Service.

A noteworthy development in Quarter 3 saw the RD&I Sub-Committee approve the format of the first fully integrated Trust RD&I Performance report at their meeting of 21 October 2021. Additionally, the Sub-Committee also received regular progress reports and assurance in respect of the RD&I Division's financial performance in achieving a balanced position against its income and expenditure position for the year ending 31 March 2021. The RD&I Division's financial performance has been incorporated into the Trust RD&I Integrated Performance Report. The format of this report will continue to mature and develop as the Sub-Committee enters its second year.

Finally, in terms of performance, the Sub-Committee received reports on key projects and programmes of work underway for the RD&I Division, this included but was not limited to:

- Research, Development & Innovation Annual Operational Plan
- Research, Development & Innovation Integrated Performance Report
- Research, Development & Innovation Financial Performance Report
- Trust Innovation Updates
- Welsh Blood Service RD&I Updates
- nVCC Research, Development & Innovation Group Updates
- Advancing Radiotherapy Fund Highlight Report

7. Discussion held in Part B / Private Committee

There is facility for the Committee to consider reports that contain commercially sensitive or potentially identifiable/sensitive information in Part B/Private Committee. The Committee considered reports in Private in relation to:

- Business Case Expenditure Proposals
- Business Case Annual Evaluation Reports
- Health & Care Research Wales – feedback from Annual Meeting
- Feedback from the Trust Research & Development Annual Performance Meeting
- Discussion on access to the FAKTION Fund
- Innovation Idea for Palliative Care

8. Reporting the Committee's Work

The Chair of the RD&I Sub-committee reports the key issues discussed at each of its meetings by way of a Highlight Report to the Quality, Safety & Performance Committee and Strategic Development Committee as appropriate. The Highlight report provides facility for the Committee to alert/escalate; advise; assure; or inform its overarching Committees in relation to quality, safety, performance and strategic matters. Committee papers, including minutes, are published on the Trust's internet pages.

9. RD&I Sub-committee Annual Effectiveness Survey

The RD&I Sub-committee Effectiveness Survey is undertaken on an annual basis to determine the effectiveness of the Committee in meeting its operations in accordance with its Terms of Reference and the Trust Standing Orders.

9.1 Methodology

A Committee survey consisting of eighteen questions was established via an online survey platform. The survey questions were designed and selected to gain valuable feedback and harness the opinion of both Members and regular Attendees, to ascertain their views with respect to the Committee's inaugural year of operation. The aim of which was to identify any learning opportunities in the pursuit of continuous improvement.

All questions were posed in a structured format with survey respondents invited to provide a reason / supporting comments for each question. The questionnaire was designed to require respondents to answer each question before enabling them to progress onto the next question. No personal data was collected in the completion of the survey questionnaire; hence, all responses are anonymised.

9.2 Findings

20 surveys were sent out and a total of 11 responses were received, therefore an overall completion rate of 55%. The full survey results are provided below:

9.2.1 Survey question 1

Please indicate if you are a 'Member' of the Research, Development & Innovation Subcommittee i.e. Independent Member or a regular 'Attendee' of the Committee.

Members:

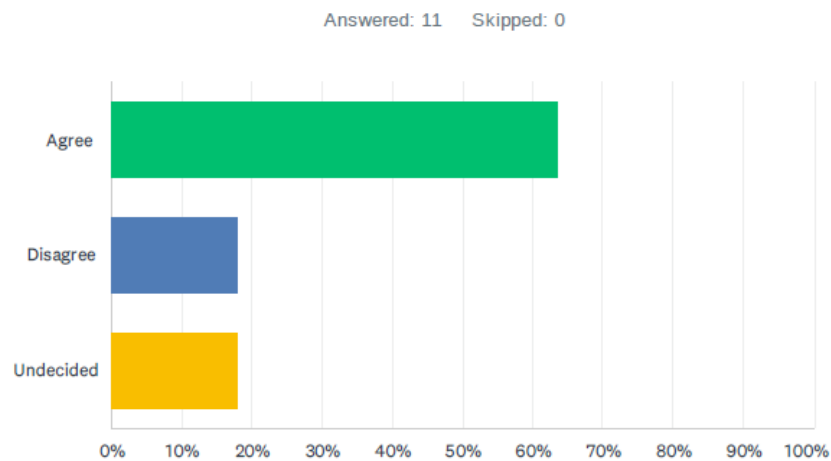
The Committee is made up of 2 'Members' i.e. Committee Chair and 1 Independent Member, 2 'Members' responded to the survey, providing an overall response rate of 100% by the Committee's Members.

Regular Attendees:

In the Committee's first year of operation there were a total of 18 'Regular Attendees'. This includes representatives of independent and partner organisations and patients. A total of 9 'Regular Attendees' responded to the survey, providing an overall response rate of 50 % by the Committee's 'Regular Attendees'.

9.2.2 Survey question 2

There are clear Terms of Reference, with clarity as to the role of the Research, Development & Innovation Sub-committee and the relationship between the Committee and the Trust Board.

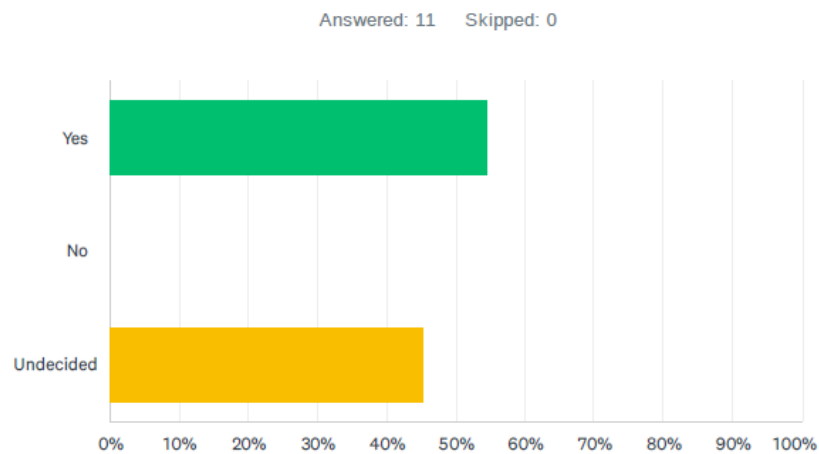


ANSWER CHOICES	RESPONSES	
Agree	63.64%	7
Disagree	18.18%	2
Undecided	18.18%	2
TOTAL		11

#	COMMENTS
1	As I become chair of this group from Jan 2022, I would like to revisit the Terms of Reference, to ensure that they are clearly aligned with the ambitions of the sub-committee, and ensure reporting to Trust Board.
2	A Diagram would be welcomed, together a overarching structure illustrating all formal committee would be welcome. This would be a welcome transparency step and prevent ineffective formation of sub groups
3	the RDI committee reports to both quality safety and performance committee and strategic development committee and can escalate matters to the Trust board. Also there are a number of committees which report to or influence RDI committee for example advancing radiotherapy and Research Operational Management group. In addition RDI gives approval/endorsement to certain papers prior to them going to Charitable funds committee. my view is that there could be a more straightforward way of conducting business

9.2.3 Survey question 3

Has the Research, Development & Innovation Sub-committee been provided with sufficient authority and resources to fulfil its role effectively?

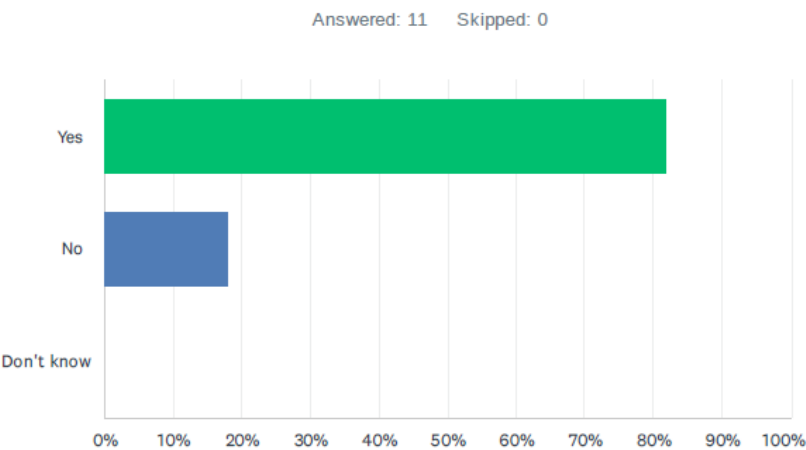


ANSWER CHOICES	RESPONSES	
Yes	54.55%	6
No	0.00%	0
Undecided	45.45%	5
TOTAL		11

#	COMMENTS
1	I would say that the sub-committee has sufficient authority to influence decisions at Trust Board. I am less sure as to the resource requirements of the group, and whether these are sufficient.
2	there is some ambiguity

9.2.4 Survey question 4

Has the Research, Development & Innovation Sub-committee established a Cycle of Business to be dealt with during the year?

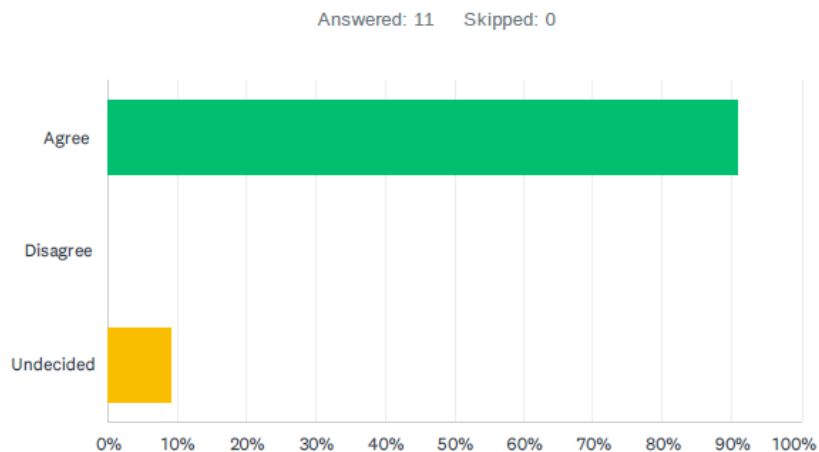


ANSWER CHOICES	RESPONSES	
Yes	81.82%	9
No	18.18%	2
Don't know	0.00%	0
TOTAL		11

#	COMMENTS
1	The contents of the business cycle will be subject to continuous review.

9.2.5 Survey question 5

The number and length of meetings is sufficient to allow the Research, Development & Innovation Sub-committee to fully discharge its duties.

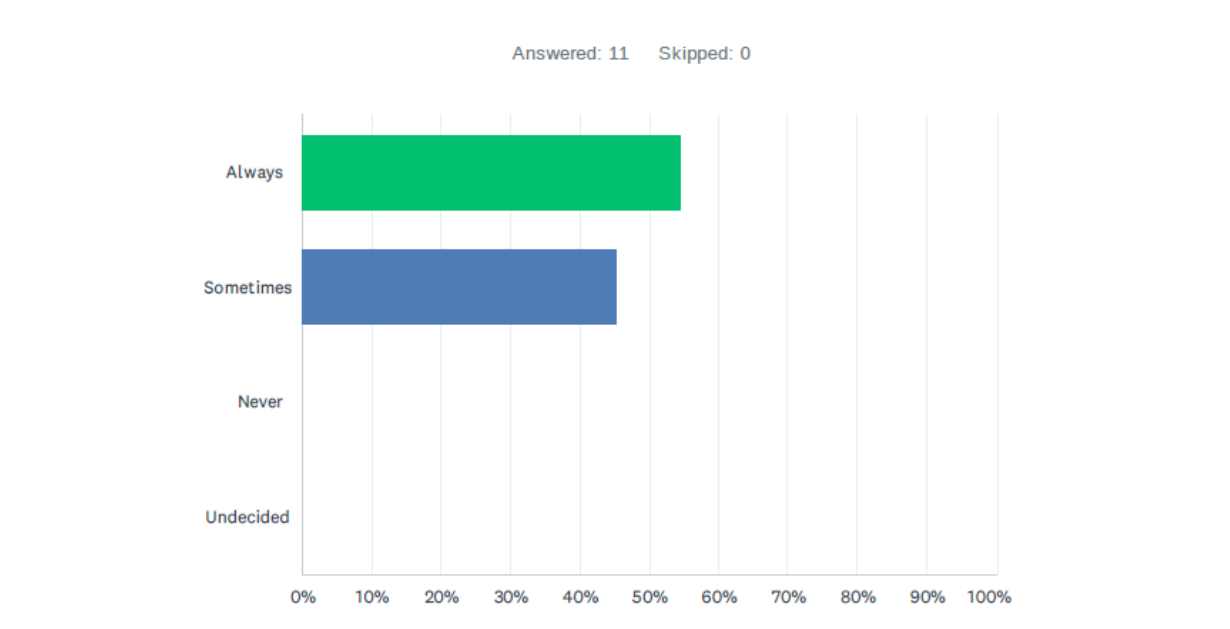


ANSWER CHOICES	RESPONSES	
Agree	90.91%	10
Disagree	0.00%	0
Undecided	9.09%	1
TOTAL		11

#	COMMENTS
1	In the past these meetings have over run quite significantly,. However a great deal of work has been done this year to streamline the agendas and the reports
2	I wouldn't advocate changing the number and length of meetings at the moment, but again this will be kept under constant review.
3	To much discussion that needs to be talked to in private setting prior to committee There seems to be too much pulling up of detail up the reporting levels leaving the committee review previous agreed information. This also has the effect of diluting the messages that the operational levels are trying to escalate

9.2.6 Survey question 6

Is sufficient time allowed for questions, discussion and debate at the Research, Development & Innovation Sub-committee meetings?

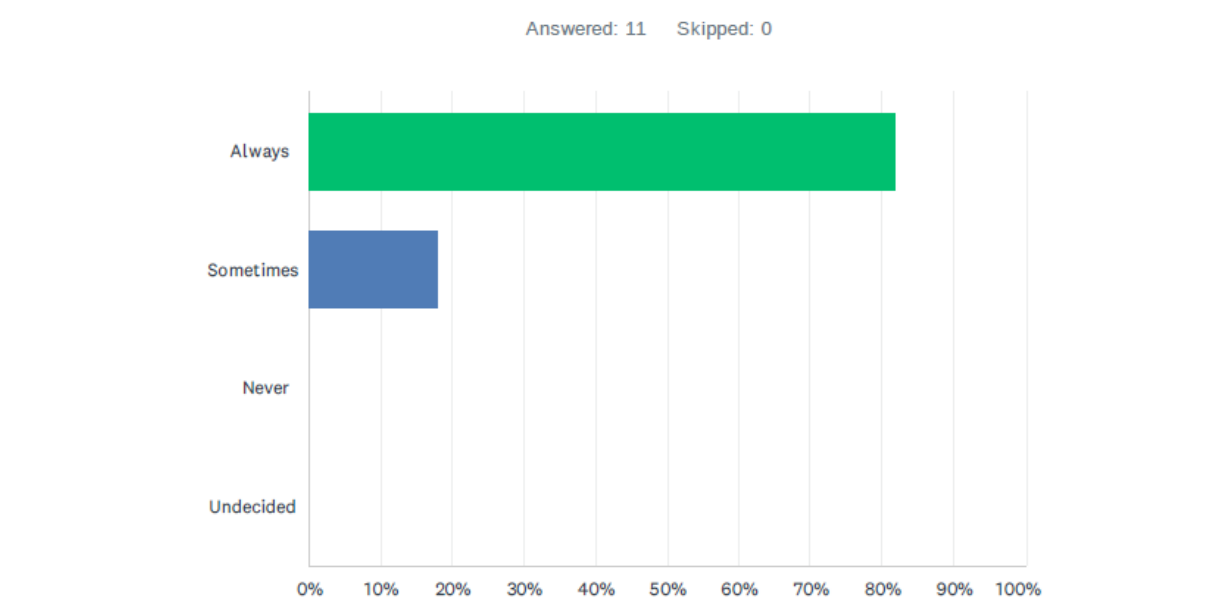


ANSWER CHOICES	RESPONSES
Always	54.55%6
Sometimes	45.45%5
Never	0.00%0
Undecided	0.00%0
TOTAL	11

#	COMMENTS
1	Given the nature and diversity of research the agenda can be busy .
2	There have been occasions when items have had to be deferred to ensure adequite time has been given to all items on the agenda.
3	My limited experience on this sub-committee suggests that this is the case.

9.2.7 Survey question 7

The Research, Development & Innovation Sub-committee papers are received sufficiently far in advance of meetings?

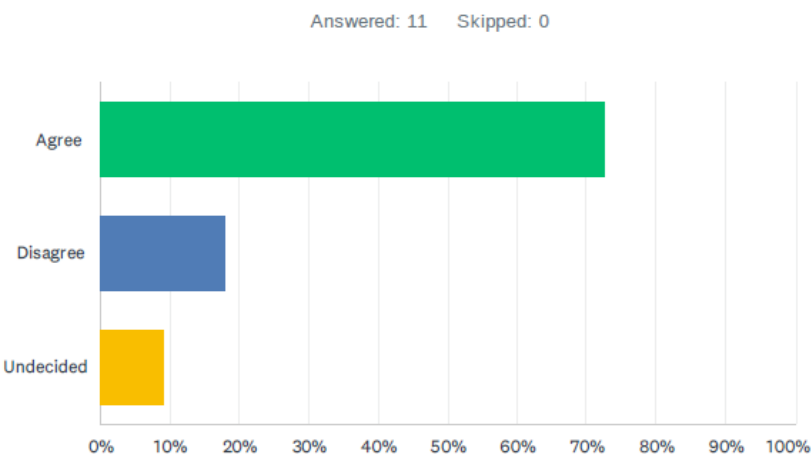


ANSWER CHOICES		RESPONSES	
Always		81.82%	9
Sometimes		18.18%	2
Never		0.00%	0
Undecided		0.00%	0
TOTAL			11

#	COMMENTS
1	Yes, in my limited experience.
2	See response to question 5

9.2.8 Survey question 8

The papers received by the Research, Development & Innovation Sub-committee are concise and relevant?

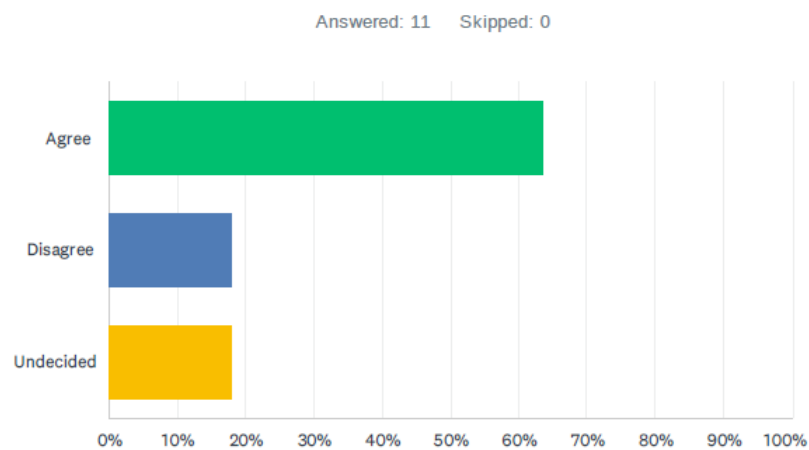


ANSWER CHOICES	RESPONSES	
Agree	72.73%	8
Disagree	18.18%	2
Undecided	9.09%	1
TOTAL		11

#	COMMENTS
1	There has been an improvement
2	the performance report is improving

9.2.9 Survey question 9

I feel the Research, Development & Innovation Sub-committee receives sufficient detail, at the right level to allow me to focus on asking the right questions.

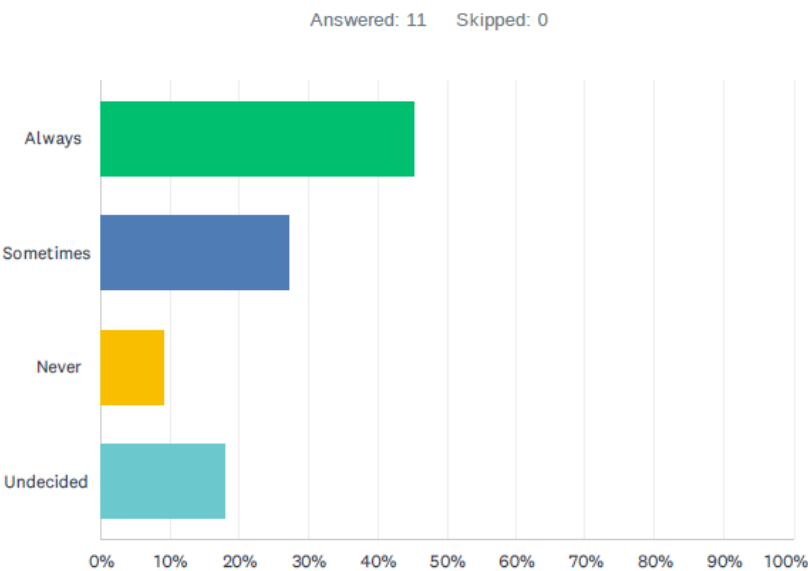


ANSWER CHOICES		RESPONSES	
Agree		63.64%	7
Disagree		18.18%	2
Undecided		18.18%	2
TOTAL			11

#	COMMENTS
1	There's detail --- but it a dilutant to any focus
2	the quality of some of the papers is poor.

9.2.10 Survey question 10

Are Research, Development & Innovation Sub-committee meetings scheduled prior to important decisions being made?

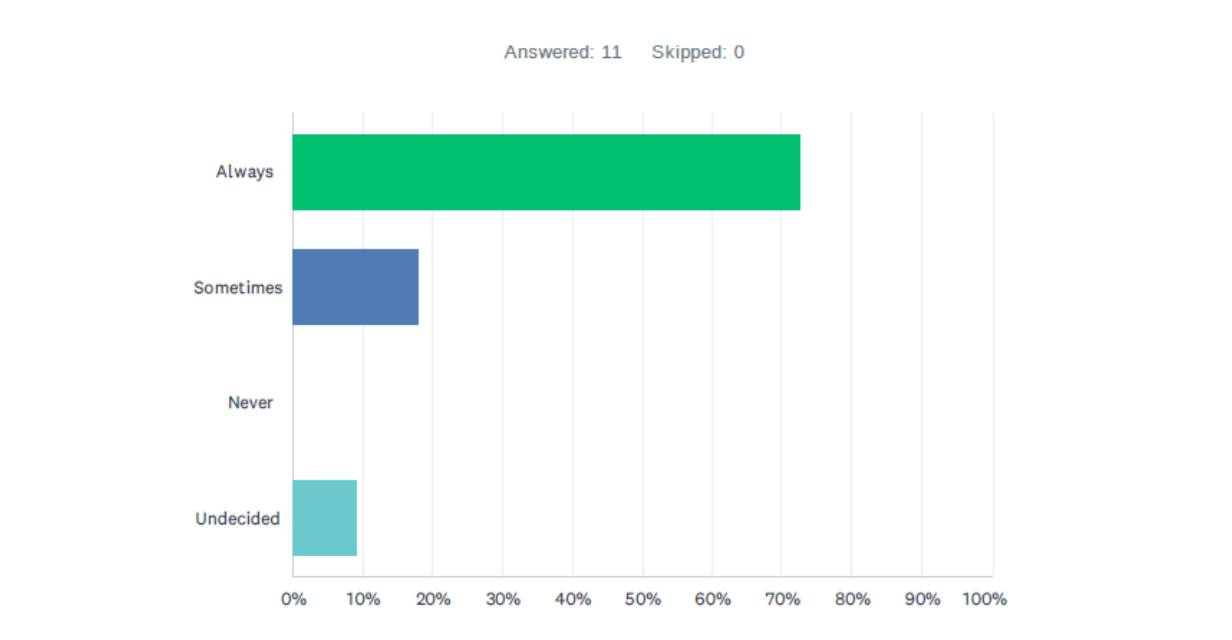


ANSWER CHOICES	RESPONSES	
Always	45.45%	5
Sometimes	27.27%	3
Never	9.09%	1
Undecided	18.18%	2
TOTAL		11

#	COMMENTS
1	This is an area for review, and dependent on timing of important external RDI strategy papers.
2	they are routine

9.2.11 Survey question 11

Is the behaviour of all Members / Attendees at the Research, Development & Innovation Sub-committee meetings courteous and professional?

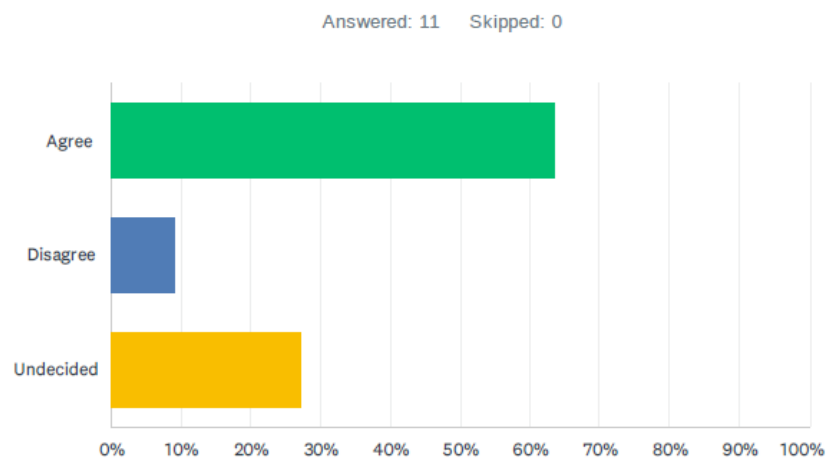


ANSWER CHOICES		RESPONSES	
Always		72.73%	8
Sometimes		18.18%	2
Never		0.00%	0
Undecided		9.09%	1
TOTAL			11

#	COMMENTS
1	There have been rare occasions in meetings when this has not been the case.

9.2.12 Survey question 12

The Research, Development & Innovation Sub-committee Chair has a positive impact on the performance of the Committee.

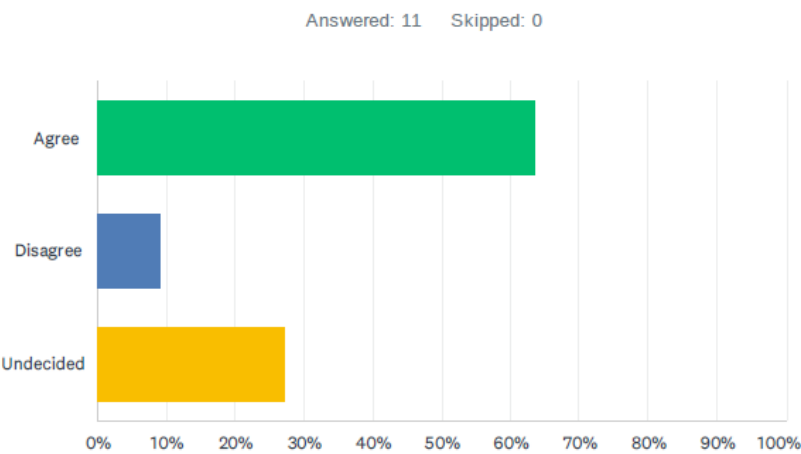


ANSWER CHOICES		RESPONSES	
Agree		63.64%	7
Disagree		9.09%	1
Undecided		27.27%	3
TOTAL			11

#	COMMENTS
1	Mostly
2	interesting question

9.2.13 Survey question 13

The Research, Development & Innovation Sub-committee meetings are chaired effectively with clarity of purpose and outcome.

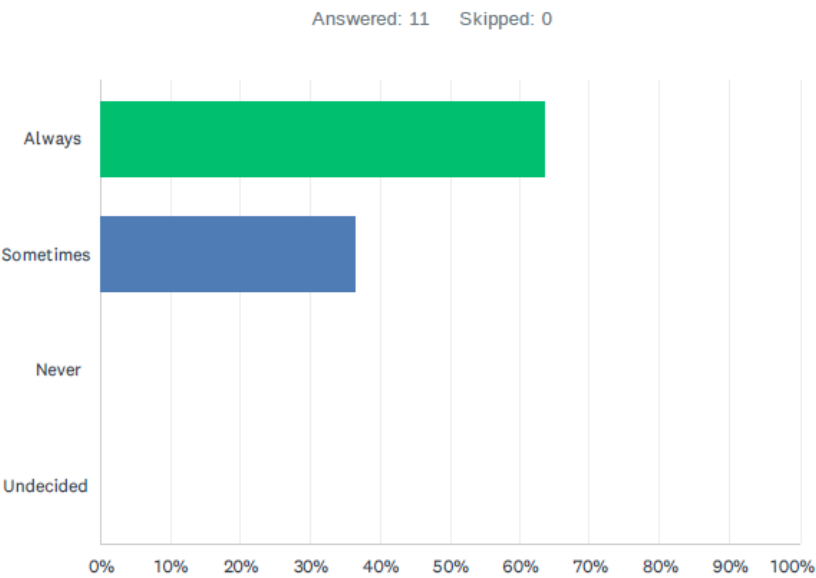


ANSWER CHOICES	RESPONSES	
Agree	63.64%	7
Disagree	9.09%	1
Undecided	27.27%	3
TOTAL		11

#	COMMENTS
1	its been a struggle but things are improving

9.2.14 Survey question 14

Is each agenda item at the Research, Development & Innovation Sub-committee closed off with clarity on the decision / outcome of discussion?

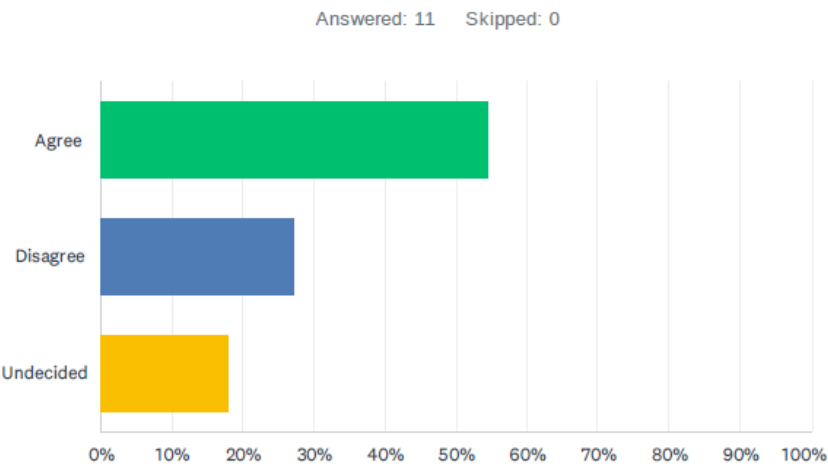


ANSWER CHOICES	RESPONSES
Always	63.64%7
Sometimes	36.36%4
Never	0.00%0
Undecided	0.00%0
TOTAL	11

#	COMMENTS
1	Yes, in my limited experience of a single meeting.
2	I would say mostly rather than sometimes

9.2.15 Survey question 15

The Research, Development & Innovation Sub-committee Chair allows debate to flow freely and does not assert their own views too strongly.

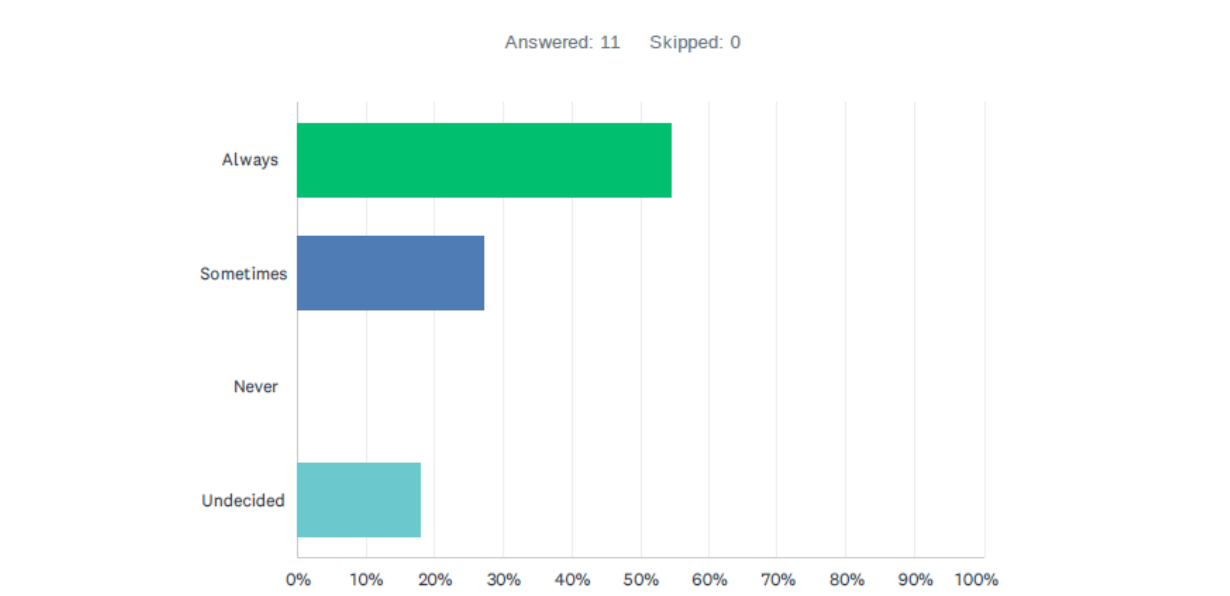


ANSWER CHOICES	RESPONSES	
Agree	54.55%	6
Disagree	27.27%	3
Undecided	18.18%	2
TOTAL		11

#	COMMENTS
1	This is often borne of passion for seeing the Trust excel in RD&I
2	There's no debate or the debate is closed off at this level.
3	it sometimes necessary to be directive

9.2.16 Survey question 16

Is the atmosphere at the Research, Development & Innovation Sub-committee meeting conducive to open and productive debate?

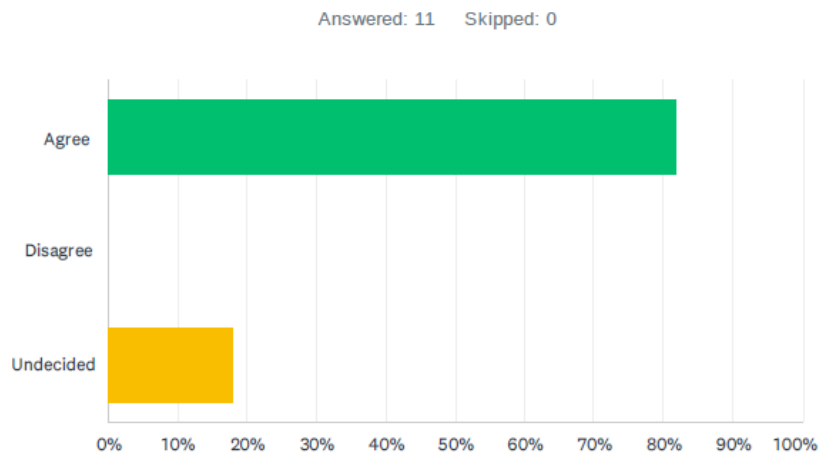


ANSWER CHOICES	RESPONSES	
Always	54.55%	6
Sometimes	27.27%	3
Never	0.00%	0
Undecided	18.18%	2
TOTAL		11

#	COMMENTS
1	The atmosphere is sometimes charged due to the passion of those involved in the RD&I work streams in what has been a difficult year for all
2	Its not a debate forum

9.2.17 Survey question 17

The Research, Development & Innovation Sub-committee has effective escalation arrangements in place to alert relevant individuals, Committees, Board of any urgent / critical matters that may affect the operation and / or reputation of the Trust.

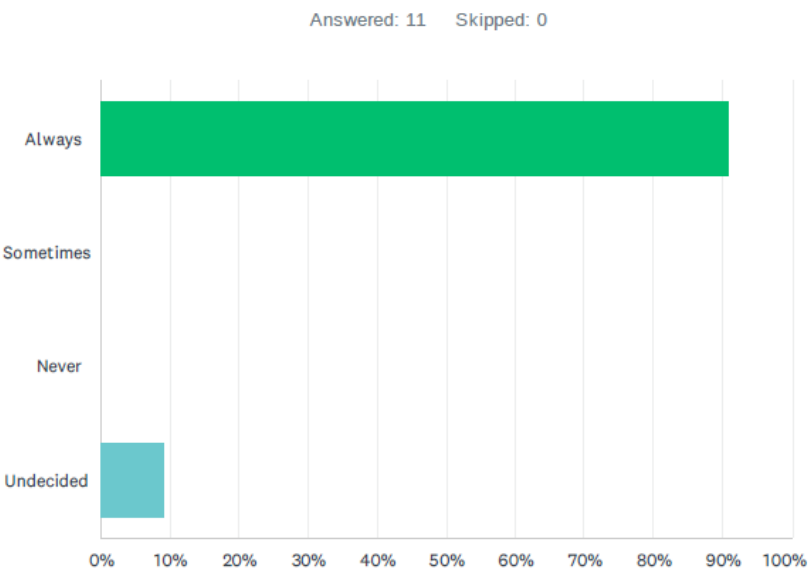


ANSWER CHOICES		RESPONSES	
Agree		81.82%	9
Disagree		0.00%	0
Undecided		18.18%	2
TOTAL			11

#	COMMENTS
1	Escalation to main board is the main route. I need to better understand other escalation arrangements.

9.2.18 Survey question 18

Do you consider that where Private (Part B) Research, Development & Innovation Subcommittee meetings are held, that these have been used appropriately for items that should not be discussed in the public domain?



ANSWER CHOICES		RESPONSES	
Always		90.91%	10
Sometimes		0.00%	0
Never		0.00%	0
Undecided		9.09%	1
TOTAL			11

#	COMMENTS	DATE
	There are no responses.	

10. Conclusions and way forward

Members of the Trust Research, Development & Innovation Sub-committee have extended thanks to all those involved in supporting the work of the Committee in its inaugural year, and for the constructive and positive way in which attendees have contributed to the work of the Committee as it evolves and continues to develop and mature.

The outcomes from the Committee Annual Effectiveness Survey will help to inform the continuing evolution of the Research, Development & Innovation Sub-committee as it enters its second year. In addition to the above key areas of focus will include:

- Reviewing the current RD&I meeting structure, in accordance with the Corporate Governance Framework, to ensure an optimum, streamlined and compliant process that enables an agile RD&I service business model.
- Keeping the approved Cycle of Business under review to ensure that it remains appropriate to inform the delivery of the Sub-Committees work in line with the Terms of Reference.
- Continuing the work commenced in 2021 to keep the agenda and reports streamlined and concise

RD&I Meeting Structure

